

July 5, 2002

**FISCAL YEAR 2002 DECISION SUPPORT SYSTEM (DSS)
OUTPATIENT IDENTIFIERS**

1. PURPOSE: This Veterans Health Administration (VHA) Directive defines the Decision Support System (DSS) Identifiers. ***NOTE:** DSS Identifiers are also known as stop codes.* It is a guide to the operational set-up of DSS Identifiers by local Department of Veterans Affairs (VA) medical center Health Administration Service staff. It informs major users of VHA Ambulatory Data Sets concerning the current descriptions and definitions of VHA outpatient workload centers (production units).

2. BACKGROUND: For more than 20 years, VHA has collected ambulatory care data which supports the continuity of patient care, resource allocation, performance measurement, quality management and research, and improves third-party payment or collections. The DSS Identifiers assist VA medical centers in defining outpatient production units, which are critical for costing outpatient VHA work. In the absence of sufficient Ambulatory Care case-mix indicators, DSS Identifiers or Stop Codes have a value for grouping like-types of care both for economic and resource utilization analysis.

a. Fiscal Year (FY) 2002 DSS Definitions

(1) **Definition of DSS.** DSS provides information to support VHA business needs including: multi-pay or revenue determination; product and case-costing; resource utilization tracking; quality indicators; retrospective review of groups of cases for various quality protocols, reimbursement modeling and annual VA medical center and Veterans Integrated Services Network (VISN) budgeting.

(2) **Definition of DSS Identifier.** A DSS Identifier is a VHA term, effective October 1, 1996, that characterizes VHA Ambulatory Care Clinics by a six-character descriptor. The DSS Identifier value is transmitted to the National Patient Care Database (NPCD) with each separate outpatient encounter into the NPCD field "DSS Identifier." A primary stop code and a secondary stop code compose the DSS Identifier.

(a) **Primary Stop Code.** The first three characters of the DSS Identifier represent the primary stop code. The primary stop code designates the main Ambulatory Care Clinical Group or production unit responsible for the clinic. Three numbers must always be in the first three characters of a DSS Identifier for it to be valid.

(b) **Secondary Stop Code.** The last three characters of the DSS Identifier contain the secondary stop code which serves as a modifier to further define the primary work group. The VA medical center uses the secondary stop code, when appropriate, as a modifier of the work in the primary Ambulatory Care work unit (primary stop code).

THIS VHA DIRECTIVE EXPIRES JULY 31, 2007

VHA DIRECTIVE 2002-041

July 5, 2002

1. The secondary stop code modifier can represent the type of services provided. A Diabetes Specialty Clinic, for example, that also gives Primary Care services to Diabetic patients would have a DSS Identifier, 306 Diabetes (the primary stop code to designate the work group) and 323 Primary Care Medicine (the secondary stop code to designate the services provided).

2. The secondary stop code modifier can represent the type of provider or team. For example, a Mental Health Clinic clinic run by a social worker can be designated 502125.

3. The secondary stop code modifier can also represent a specially funded program. For example, an Alcohol Abuse Clinic within a Substance Abuse work group would be 513 (Substance Abuse Individual Counseling), 461 (Alcohol Specially-funded Program).

(c) The NPCD. VHA stores outpatient visit data in Statistical Analysis System (SAS) files at the Austin Automation Center (AAC). In 1997, VHA replaced the legacy Outpatient Clinic (OPC) system with NPCD, and then switched the data source for the outpatient SAS files from OPC to NPCD. In NPCD, the DSS Identifier is stored in a single field that contains both the primary, and if entered, the secondary stop code. When the data is extracted from NPCD to the SAS files, the primary stop code is stored in the variable CL and the secondary stop code is stored in the variable CLC. This is only true for the Austin file MDPPRD.MDP.SAS.SEyy (where yy = fiscal year), an encounter-based file. The only other SAS file maintained for outpatient workload is MDPPRD.MDP.SAS.SFyy, a file that lists only primary clinic stops associated with a veteran's health care visit. In FY 2002, the MPDPPRD.MDP.SAS.SCyy and SGyy files were discontinued. **NOTE:** *NPCD outpatient encounters are reported for workload using only the primary DSS identifier.*

(3) **Importance of DSS Identifiers.** DSS Identifiers are the single and critical designation by which VA defines outpatient production units or clinical work units. **NOTE:** *For Medicare cost reports, VA needs to have production units in the clinic or "Ambulatory Care Revenue Centers." DSS Identifiers have been used to designate these medicine work units for outpatients.*

(a) Standardization. It has become increasingly important that VA medical centers standardize the use of DSS Identifiers and not deviate from nationally directed standards. **NOTE:** *This is especially true in critical areas like Ambulatory Surgery, Primary Care, and Observation.*

(b) Relationship to the Cost Distribution Report (CDR). For FY 1997 and thereafter, the CDR extracts only the primary stop code portion of the six character DSS Identifier for CDR work purposes.

(4) **Basis of DSS Identifiers and a Major Principle of DSS Identifier Set-up in FY 2002**

(a) A major clarification in the future use of VHA stop codes was made at the final Ambulatory Care Redesign meeting in November 1995, in the Medical Care Cost Fund (MCCF) Program Office in Washington, DC.

1. Since 1997, the use of stop codes has been focused on two important purposes:
 - a. To indicate the outpatient work group (or production unit) which was responsible for providing the specific set of clinic products; and
 - b. To serve as stable, VA medical center-specific products which could be used to compare costs between sites over the years when attached to a value for scheduled-time and other modifiers; i.e., as the DSS feeder key for Ambulatory Care products.
2. The diagnostic information for Ambulatory Care patients is taken from International Classification of Disease, 9th Edition, Clinical Modification (ICD-9 CM) codes. Current Procedure Terminology 4th Edition (CPT-4) published by the American Medical Association and Healthcare Common Procedure Coding System (HCPCS) level II codes published by the Centers for Medicare and Medicare Services are used to denote clinical interventions.
 - (b) Many VHA national database users actively use the DSS Identifiers for workload searches to indicate the general type of work, as well as the type of production unit creating this work, for example:
 1. CDR;
 2. VHA reimbursement office, i.e., Allocation Resource Center (ARC) - Veterans Equitable Resource Allocation (VERA);
 3. Clinical program offices;
 4. Health Service Research and Development (HSR&D); and
 5. National VHA Performance Measures.
 - (c) Others depend on VHA stable and reliable stop codes to represent similar work for outpatient care in VHA National Databases over the years.

b. Use of Stop Codes in VA Medical Centers with Text Integration Utility (TIU) or Clinic Patient Record System (CPRS)

(1) **Initiation.** In FY 1999, several VA medical centers started to use TIU, which is a prerequisite for CPRS.

(2) **Problems with Unscheduled Visits on TIU.** When a VA medical center outpatient provider is using the Event Capture System (ECS) to send data to Patient Care Encounter (PCE) automatedly, a problem is encountered if a TIU unscheduled visit is made for the same patient. The TIU requires the provider to enter a visit before the progress note can be done, so a second visit (equals an outpatient encounter on DSS) will be made for the same stop for the same day and provider, when the ECS automated entry option is used.

VHA DIRECTIVE 2002-041

July 5, 2002

(a) On DSS this does not represent a problem because:

1. All the clinic utilization for the same SSN on the same day for the same primary stop code is reported as only one encounter.

2. The products coming from the DSS clinic (CLI) extract should be already "stats only," and the ECS products are and should be used for the only Department Cost Manager (DCM)-costed products.

(b) However, for the Health Administration Service (HAS) and for PCE, this required function of TIU effectively results in double counts for TIU-users in clinics sending data to PCE from ECS.

(3) Two Options for VA Medical Centers to use in Solving the TIU Unscheduled Visit Problem

(a) Option One. Option one, the preferred option, is for the VA medical center HAS to create a second, non-count HAS clinic for TIU-users to write notes for unscheduled patients. The original count clinic stop code should be used only for data coming to PCE from ECS.

(b) Option Two. Option two is to allow both TIU-created unscheduled visits and ECS data and/or cost visits to enter PCE as separate encounters for the same SSN, same primary stop on the same day. This requires no action by the VA medical center's HAS.

(4) For VA Medical Centers with TIU and/or CPRS, New HAS Set-up for Simultaneous Data Entry into ECS and into TIU Progress Notes. To enhance single-entry and sign-on functionality for VA medical centers using TIU (with CPRS and ECS data entry), the Associate Chief Information Officer (ACIO) for Technical Services' Support Team for DSS, at Albany, NY, has provided guidelines (see Att. Q) on how to set-up a menu template to help set-up a TIU - ECS-combined menu so one can go directly from entry of a TIU progress note to entry of an ECS procedure.

c. Use of DSS Identifiers

(1) VHA is moving toward Patient Care Service Lines and provider-led practice groups or teams to provide coordinated comprehensive managed care to their team's panel of patients.

(2) DSS Identifiers are markers for VHA Ambulatory Care Production Units like Medicare Revenue Centers. DSS identifiers serve as guides to DSS outpatient department structures.

(3) This DSS Directive to capture Ambulatory Care Data, is developed in service lines sets as follows:

| | |
|-------------------------|--|
| 100 – 299 | Ancillary and General Support Services |
| 300 – 399 | Medicine and Primary Care Services |
| 400 – 449 | Surgical Services |
| 500 – 599 | Mental Health Services |
| 450 – 499 and 600 – 999 | Other |

July 5, 2002

d. **Method to Request New DSS Identifiers.** Work with the relevant VHA Central Office Clinical Program Office to submit a request to the DSS Program Office at the Bedford Technical Support Office (BTSO), by Microsoft (MS) Exchange, Forum E-mail, Troy E-mail, or by Fax at 781-275-5416. The request will be reviewed for technical impact, and referred to the field-based DSS Identifier Task Force for consideration and prioritization.

e. **Relationship the Veterans Health Information Systems and Technology Architecture (VistA) HAS Stop Code Files with AAC.** Annually, all new DSS Identifier changes outlined in numbered administrative issues, are updated in HAS files and AAC edits.

3. POLICY: It is VHA policy that the procedures for the selection and management of the VHA DSS Identifier system apply to all field facilities.

4. ACTION: All HAS DSS Identifiers are to match all DSS worksheet DSS Identifiers at least in the primary position at each VA medical center. Matching in all six characters is recommended. This applies to all clinics that are "count" clinics for DSS.

a. VA medical centers and VISNs must use DSS Identifiers in a standard and consistent manner: for national VHA and network VISN comparison purposes; for ease in automating the new DSS-developed template for outpatient facility Medicare and CMS Cost Reporting; for the current national VHA CDR; and for reliable benchmarking and outpatient contract cost predictions. **NOTE:** *Full adherence to the FY 2002 DSS Identifier set up instructions is expected. DSS Identifiers are updated annually.*

(1) In FY 2002, the VA medical center HAS should ensure that the HAS DSS Identifiers for each clinic are in concurrence with the DSS Site Manager's DSS Identifiers from the DSS worksheet. This is necessary because the DSS identifier of the clinic (used by the VA medical center HAS) creates the DSS Medical Record encounter to which the DSS Identifier from the DSS worksheet must send the costed intermediate product from the DSS CLI Extract and other case resource utilization. To create the most appropriate cost products for Ambulatory Care, DSS Identifiers (from both HAS and the DSS worksheet) should match.

(2) In FY 2002, local stops 450 through 485 should only be used in the secondary stop code position for clinic reported workload that is sent to DSS as indicated on the DSS worksheet by any DSS Action Code other than #6 (not sent to DSS). This rule applies when the work is "non-count" to HAS, but "count" to DSS. In the case of a clinic set up for inpatient only, for example, where HAS considers the clinic non-count, DSS would always designate such a clinic a count clinic.

(3) The only exception is for a clinic set up to be "non-count" for both HAS and for DSS. Then local stops 450 through 485 would be permitted in the primary position.

NOTE: *See Attachment J, Table F for a complete listing of all October 1, 2001, DSS Identifiers and their specific definitions.*

VHA DIRECTIVE 2002-041

July 5, 2002

b. Use the attachments to further enable the use of DSS Identifiers at each facility. The attachments are listed as follows:

- (1) **Attachment A.** Glossary of Acronyms.
- (2) **Attachment B.** Current Active DSS Identifiers (10/1/01) (Table A).
- (3) **Attachment C.** Summary of 10/1/01 New and Inactivated DSS Identifiers (Table B).
- (4) **Attachment D.** Existing Primary Stop Code Definition Changes (Table C).
- (5) **Attachment E.** Existing Secondary Stop Code Identification Changes (Table D).

***NOTE:** There is no attachment E in this FY 2002 version of the DSS Outpatient Identifiers directive.*

- (6) **Attachment F.** Stop Codes 100-299 Series Including Observation (290-299).
- (7) **Attachment G.** Stop Codes 300 Series, Definitions for Primary Care Data Reporting.
- (8) **Attachment H.** Stop Code 400 Series, Ambulatory Surgery Data Reporting.
- (9) **Attachment I.** Stop Code 500-999 Series, Mental Health and Other.
- (10) **Attachment J.** Complete Summary of October 1, 2001, Active Stop Codes (Table F).
- (11) **Attachment K.** Ancillary Stop Codes and Health Administration Service (HAS) Exempt Stop Codes.
- (12) **Attachment L.** Telephone Stop Code List.
- (13) **Attachment M.** Always Non-Billable Decision Support System (DSS) Identifiers.
- (14) **Attachment N.** Sometimes Non-Billable Clinics with These Stops May Need to be Set Up as “Not Billable” on HAS Autobiller.
- (15) **Attachment O.** Fiscal Year 2002 Short Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.
- (16) **Attachment P.** Fiscal Year 2002 National Alpha Code Description Decision Support System (DSS) National Suffixes for Use with DSS Identifier Credit Pairs as Feeder Keys for DSS Intermediate Products.
- (17) **Attachment Q.** Event Capture and/or Text Integration Utility Menu Template.
- (18) **Attachment R.** Fiscal Year 2002 Home and Community Health Care Decision Support System Structure.

5. REFERENCES

- a. American Society for Testing and Materials, Standard E1384-91.
- b. National Committee for Vital and Health Statistics, Uniform Ambulatory Medical Care Minimum Data set.
- c. M-1, Part I, Chapter 16.

6. FOLLOW-UP RESPONSIBILITY: The Chief Financial Officer, DSS Program Office (175F), is responsible for the contents of this directive. Questions may be referred to (781) 275-9175, extension 123.

7. RESCISSIONS: VHA Directive 2000-009 and its changes are rescinded. This VHA Directives expires July 31, 2007.

S/ Nevin M. Weaver for
Robert H. Roswell, M.D.
Under Secretary for Health

Attachments

DISTRIBUTION: CO: E-mailed 7/9/2002
FLD: VISN, MA, DO, OC, OCRO, and 200 E-mailed 7/9/2002

ATTACHMENT A

GLOSSARY OF ACRONYMS

| | |
|---------|---|
| AAC | Austin Automation Center (Where most VHA National databases are housed.) |
| AAS | Australian Antigen Serological Test |
| AD | Alzheimer's Disease |
| ADAM | Aneurysm Detection and Management |
| AEP | Auditory Evoked Potential |
| AFC | Ambulatory family Counseling |
| AICC | Advanced Illness Coordinated Care |
| AICS | Ambulatory Information Capture System |
| ALBCC | Account Level Budgeter Cost Center |
| AMIS | Automated Medical Information System |
| ANP | Advanced Nurse Practitioner |
| ARC | Allocation Resource Center |
| | |
| BDOC | Bed Days of Care |
| BOC | Budget Object Class |
| BROS | Blind Rehab Outpatient Specialist |
| BTSO | Bedford Technical Support Office |
| | |
| CAD | Computer Aided Design |
| CAM | Computerized Aided Modeling |
| CAT | Computer Assisted Training |
| CBC | Complete Blood Count |
| CDR | Cost Distribution Report |
| CFO | Chief Financial Officer |
| CLI | Clinic |
| CMO | Chief Medical Officer |
| CMS | Centers for Medicare and Medicaid Services (formerly the Health Care Finance Administration (HCFA)) |
| C&P | Compensation and Pension |
| CMRS | Computerized Medical Record System |
| CNH | Community Nursing Home |
| CONSULT | Consultation |
| COS | Chief of Staff |
| CPRS | Clinic Patient Record System |
| CPT | Current Procedural Terminology |
| CPU | Central Processing Unit |
| CT | Computerized Tomography |
| CWT | Compensated Work Therapy |
| | |
| DCHV | Domiciliary Care for Homeless Veterans |
| DCM | Department Cost Manager (production unit reporting part of DSS) |
| DCR | Daily Cost Resource |
| DM | Diabetes Mellitus (i.e., sugar diabetes) |

VHA DIRECTIVE 2002-041

July 5, 2002

| | |
|----------|--|
| DOD | Department of Defense |
| DOM | Domiciliary |
| DSM-IV | Diagnostic and Statistical Manual of Mental Diseases, 4 th Edition |
| DSS | Decision Support System |
| EAP | Employee Assistance Program |
| ECHO | Echocardiogram |
| ECS | Event Capture System (a generic resource utilization package in VistA Class I software) |
| EEG | Electroencephalogram |
| EKG | Electrocardiogram |
| EMG | Electromyogram |
| ENT | Ear, Nose, and Throat |
| ETT | Exercise Tolerance Test |
| EVAL | Evaluation |
| FCA | Family Centered Activities |
| FDR | Feeder (i.e., for DSS) |
| FMRI | Functional Magnetic Resonance Imaging |
| FMS | Financial Management System |
| FOBT | Fecal Occult Blood Test |
| FTE | Full-time Equivalent |
| FY | Fiscal Year |
| GAF | Global Assessment Functioning |
| GECSHG | Geriatric Extended Care Strategic Healthcare Group |
| GEM | Geriatric Evaluation and Management |
| GI | Gastrointestinal |
| HAS | Health Administration Services |
| HBCC | Home-based Community Care |
| HBHC | Hospital Based Home Care |
| HBPC | Home Based Primary Care |
| HCHC | Home and Community Health Care |
| HCHV | Health Care for Homeless Veterans |
| HCMH | Homeless Chronically Mentally Ill |
| HHH | Home Health Aide |
| HIMS | Health Information Management Systems |
| HIPAA | Health Insurance Portability and Accountability Act |
| HIV | Human Immunodeficiency Virus |
| HMI | Homeless Mentally Ill |
| HSR&D | Health Service Research and Development |
| HUD | Department of Housing and Urban Development |
| ICCM | Intensive Community Case Management |
| ICD-9-CM | International Classification of Disease, 9 th Edition – Clinical Modification |
| IPCC | Intensive Psychiatric Community Care |
| IRMS | Information Resources Management Services |

| | |
|-------|---|
| IV | Intravenous |
| KT | Kinesiotherapy |
| LD | Lactate Dehydrogenase (Liver Test) |
| LPN | Licensed Practical Nurse |
| MAS | Medical Administration Service |
| MAT | Manual Arts Therapy |
| MCCF | Medical Care Cost Fund |
| MD | Medical Physician |
| MDS | Minimum Data Set |
| MEG | Magnetoencephalography |
| MH | Mental Health |
| MHICM | Mental Health Intensive Case Management |
| MRA | Magnetic Resonance Appraisal |
| MRI | Magnetic Resonance Imaging |
| MS | Microsoft |
| MSDU | Medical Surgical Day Unit |
| NEPEC | New England Psychiatric Evaluation Center (at the VA Medical Center, West Haven, CT) |
| NHCU | Nursing Home Care Unit |
| NPC | National Patient Care |
| NPCD | National Patient Care Database |
| NOIS | National On-line Information Sharing |
| OOS | Occasions of Service |
| OP | Operation |
| OPC | Outpatient Clinic |
| OPT | Outpatient Therapy |
| OR | Operating Room |
| OT | Occupational Therapy |
| PA | Physician Assistant |
| PAI | Patient Assessment Instrument |
| PAP | Papanicolaou Test (i.e., cervical smear cell test) |
| PCE | Patient Care Encounter (tracking), a VHA Ambulatory Care Vista database |
| PCMM | Primary Care Management Module |
| PCT | PTSD Clinical Team |
| PEC | Patient Event Capture |
| PET | Positron Emission Tomography |
| PI | Product Information |
| PM&RS | Physical Medicine and Rehabilitation Service |
| POW | Prisoner of War |
| PPD | Purified Protein Derivative (Tuberculosis) |
| PROC | Procedure |

VHA DIRECTIVE 2002-041**July 5, 2002**

| | |
|---------|--|
| PRRTP | Psychiatric Resident Rehabilitation Treatment Program |
| PSI | Psychiatry |
| PSO | Psychology |
| PT | Physical Therapy |
| PTF | Patient Treatment File – (An AAC-based Inpatient database, also a VA medical center VistA file). |
| PTSD | Post-traumatic Stress Disorder |
| Pub. L. | Public Law |
| QO | Quality Officer |
| RAD | Radiology |
| REHAB | Rehabilitation |
| RN | Registered Nurse |
| RNP | Registered Nurse Practitioner |
| RSCH | Research |
| RT | Recreation Therapy |
| RUGS | Resource Utilization Groups |
| RVU | Relative Value Unit |
| RX | Prescription |
| SAS | Statistical Analysis System |
| SC | An Austin outpatient SAS report that lists outpatient encounters by CPT code. |
| SCI | Spinal Cord Injury |
| SDH | State Domiciliary Home |
| SF | An Austin outpatient SAS report that lists outpatient encounters by primary stop code and credit pair. |
| SHC | State Home Care |
| SNH | State Nursing Home |
| SSN | Social Security Number |
| STRAF | Special Therapeutic and Rehabilitation Activities Fund |
| SW | Social Worker |
| TIU | Text Integration Utility (a subfunction of the VHA VistA CMRS) |
| TR | Transitional Residence |
| U.S.C. | United States Code |
| VA | Department of Veterans Affairs |
| VACC | VA Cost Center |
| VASH | VA Shared Housing |
| VEP | Visual Evoked Potential |
| VERA | Veterans Equitable Resource Allocation |
| VHA | Veterans Health Administration |
| VIST | Veterans Impairment Service Team |
| VistA | Veterans Health Information Systems and Technology Architecture |
| VISN | Veterans Integrated Systems Network |

| | |
|------|-----------------------------|
| VL | Variable Labor |
| VSSC | VISN Service Support Center |

ATTACHMENT B

CURRENT ACTIVE DSS IDENTIFIERS (10/1/01).

a. Current Table A is the list of all current Decision Support System (DSS) Identifier numbers and names. **NOTE:** See Table F for descriptions of these DSS Identifiers.

NOTE: The following symbols are used in this Attachment:

- * Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload
- ** Amended use of a DSS Identifier
- + Changed DSS Identifier description
- ++ New DSS Identifier
- ‡ Added or changed DSS Identifier CDR account
- Inactivated DSS Identifier
- Ψ Work from these stop codes is always non-billable in Medical Care Cost Fund (MCCF)

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|-------------------|-----------------------|---|
| 102 | | ADMITTING and/or SCREENING |
| | 102101++ | EMERGENCY UNIT |
| 103 ^Ψ | | TELEPHONE TRIAGE |
| | 103801++ ^Ψ | IN Veterans Integrated Service Network (VISN) PHONE TRIAGE – NOT Department of Veterans Affairs (VA) MEDICAL CENTER |
| | 103802++ ^Ψ | OUT OF VISN, VA PHONE TRIAGE |
| | 103803++ ^Ψ | COMMERCIAL PHONE TRIAGE |
| 104 | | PULMONARY FUNCTION |
| 105 | | X-Ray |
| 106 | | Electroencephalogram (EEG) |
| 107 | | Electrocardiogram (EKG) |
| | 107473 | ECHOCARDIOGRAM |
| 108 | | LABORATORY |
| 109 | | NUCLEAR MEDICINE |
| 115 | | ULTRASOUND |
| 116 | | RESPIRATORY THERAPY |
| | 116329 | RESPIRATORY THERAPY PROCEDURES |
| 117 | | NURSING |
| | 117473 | Purified Protein Derivative (PPD) (Tuberculosis) CLINIC |
| | 117710 | FLUSHOT |
| 118 | | HOME TREATMENT SERVICES |
| 119 | | COMMUNITY NURSING HOME FOLLOW-UP |

VHA DIRECTIVE 2002-041**July 5, 2002****TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)**

| | | |
|------------------|---------------------|---|
| 120 | | HEALTH SCREENING |
| 121 | | RESIDENTIAL CARE (NON-Mental Health (MH)) |
| 122 | | PUBLIC HEALTH NURSING |
| 123 | | NUTRITION/DIETETICS/INDIVIDUAL |
| 124 | | NUTRITION/DIETETICS/GROUP |
| 125 | | SOCIAL WORK SERVICE |
| 126 | | EVOKED POTENTIAL |
| 127 | | TOPOGRAPHICAL BRAIN MAPPING |
| 128 | | PROLONGED VIDEO-EEG MONITORING |
| 144 | | RADIONUCLIDE THERAPY |
| 145 | | PHARMACOLOGY/PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES |
| 146 | | Positron Emission Tomography (PET) |
| 147 ^ψ | | TELEPHONE/ANCILLARY |
| | 147209 ^ψ | TELEPHONE Visual Impairment Services Team (VIST) |
| 148 ^ψ | | TELEPHONE/DIAGNOSTIC |
| 149 | | RADIATION THERAPY TREATMENT |
| 150 | | COMPUTERIZED TOMOGRAPHY (CT) |
| 151 | | MAGNETIC RESONANCE IMAGING (MRI) |
| 152 | | ANGIOGRAM CATHETERIZATION |
| 153 | | INTERVENTIONAL RADIOGRAPHY |
| 154++ | | Magnetoencephalography (MEG) |
| 155++ | | INFO ASSISTS TECHNOLOGY |
| 160 | | CLINICAL PHARMACY |
| 165 | | BEREAVEMENT COUNSELING |
| 166+ | | CHAPLAIN SERVICE – INDIVIDUAL |
| 167+ | | CHAPLAIN SERVICE - GROUP |
| 168 | | CHAPLAIN SERVICE - COLLATERAL |
| 169 ^ψ | | TELEPHONE/CHAPLAIN |
| 170 | | Home Based Primary Care (HBPC) - PHYSICIAN |
| 171 | | HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/ Physician Assistant (PA) |
| 172 | | HBPC - NURSE EXTENDER |
| 173 | | HBPC - SOCIAL WORKER |
| 174 | | HBPC – THERAPIST |
| | 174202 ^ψ | HBPC – RECREATION THERAPY |
| | 174205 ^ψ | HBPC – PHYSICAL THERAPY |
| | 174206 ^ψ | HBPC – OCCUPATIONAL THERAPY |
| 175 | | HBPC – DIETITIAN |
| 176 | | HBPC - CLINICAL PHARMACIST |
| 177 | | HBPC – OTHER |
| | 177201 | HBPC- Physical Medicine & Rehabilitation Service (PM&RS) |

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|--|
| | 177210 | HBPC- Spinal Cord Injury (SCI) |
| 178 ^ψ | | HBPC/TELEPHONE |
| 179 | | TELE-HOME CARE TECHNOLOGY UNIT |
| 180 | | DENTAL |
| 181 ^ψ | | TELEPHONE/DENTAL |
| 190 | | ADULT DAY HEALTH CARE |
| 201 | | PM & RS |
| 202 | | RECREATION THERAPY SERVICE |
| 203 | | AUDIOLOGY |
| 204 | | SPEECH PATHOLOGY |
| 205 | | PHYSICAL THERAPY |
| 206 | | OCCUPATIONAL THERAPY |
| 207 | | PM&RS INCENTIVE THERAPY |
| 208 | | PM&RS COMPENSATED WORK THERAPY (CWT) |
| | 208466 ^ψ | Domiciliary (DOM) CWT |
| 209 | | VIST COORDINATOR |
| | 209125 | VIST COORDINATOR BY SOCIAL WORKER |
| 210 | | SPINAL CORD INJURY |
| | 210414 | SCI-CYSTOURO |
| | 210468 | SCI-RN PROCEDURE |
| 211 | | AMPUTATION FOLLOW-UP CLINIC |
| 212 | | EMG – Electromyogram |
| 213 | | PM&RS VOCATIONAL ASSISTANCE |
| | 213466 ^ψ | Veterans (VETS) Education (ED)/Training (TRNG) DOM |
| 214 | | KINESIOTHERAPY |
| 215 | | SCI HOME CARE PROGRAM |
| 216 ^ψ | | TELEPHONE Rehabilitation (REHAB) AND SUPPORT |
| | 216203 ^ψ | TELEPHONE AUDIOLOGY REHAB SUPPORT SVC |
| | 216204 ^ψ | TELEPHONE SPEECH REHAB SUPPORT SERVICE |
| | 216210 ^ψ | SPINAL CORD INJURY TELEPHONE SUPPORT |
| 217 | | BLIND REHAB OUTPATIENT SPECIALIST (BROS) |
| 218+ | | Computer Assisted Training (CAT) BLIND REHAB |
| 290 | | OBSERVATION MEDICINE |
| 291 | | OBSERVATION SURGERY |
| 292 | | OBSERVATION PSYCHIATRY |
| 293 | | OBSERVATION NEUROLOGY |
| 294 | | OBSERVATION BLIND REHAB |
| 295 | | OBSERVATION SPINAL CORD |
| 296 | | OBSERVATION REHABILITATION |

VHA DIRECTIVE 2002-041

July 5, 2002

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|--|
| 301 | | GENERAL INTERNAL MEDICINE |
| 302 | | ALLERGY IMMUNOLOGY |
| 303 | | CARDIOLOGY |
| | 303201 | CARD REHAB |
| (inactivate) | 303329 - | CARDIAC CATH (see new DSS ID 333) |
| 304 | | DERMATOLOGY |
| | 304416 | DERM PHOTO THERAPY |
| | 304329 | DERM BIOPSIES |
| 305 | | ENDO METAB (EXCEPT DIABETES) |
| 306 | | DIABETES |
| | 306117 | DIABETES EDUCATION |
| 307 | | GASTROENTEROLOGY |
| | 307117 | ENTEROSTOMAL CLINIC |
| | 307329 | LIVER BIOPSIES |
| | 307454 | LIVER |
| 308 | | HEMATOLOGY |
| 309 | | HYPERTENSION |
| 310 | | INFECTIOUS DISEASE |
| 311 | | PACEMAKER |
| 312 | | PULMONARY/CHEST |
| 313 | | RENAL/NEPHROL(EXCEPT DIALYSIS) |
| | 313457 | TRANSPLANT |
| 314 | | RHEUMATOLOGY/ARTHRITIS |
| 315 | | NEUROLOGY |
| | 315456 | EPILEPSY |
| | 315469 | MOVEMENT DISORDER |
| | 315470 | SLEEP DISORDER |
| 316 | | ONCOLOGY/TUMOR |
| | 316149 | Radiology (RAD) Perscription (RX) (WITH ONCOLOGY MEDICINE SERVICE) |
| | 316329 | ONCOLOGY/TUMOR PROCEDURES |
| 317 | | COUMADIN CLINIC |
| 318 | | GERIATRIC CLINIC |
| 319 | | GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC |
| 320 | | ALZHEIMER'S AND DEMENTIA CLINIC |
| 321 | | Gastrointestinal (GI) ENDOSCOPY |
| 322 | | WOMEN'S CLINIC |
| 323 | | PRIMARY CARE/MEDICINE |
| | 323691++ | PRE-EMPLOYMENT PHYSICAL MILITARY PERSONNEL |
| 324 ^ψ | | TELEPHONE/MEDICINE |

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|--|
| 325 ^ψ | | TELEPHONE/NEUROLOGY |
| 326 ^ψ | | TELEPHONE/GERIATRICS |
| 327 | | MED Physician (MD) PERFORM INVASIVE Operating Room (OR) Procedure (PROC) |
| 328 | | MEDICAL SURGICAL DAY UNIT (MSDU) |
| 329 | | MEDICAL PROCEDURE UNIT |
| 330 | | CHEMOTHERAPY PROCEDURES UNIT MEDICINE |
| 331 | | PRE-BED CARE Physician (MD) (MEDICAL SERVICE) |
| 332 | | PRE-BED CARE RN (MEDICAL SERVICE) |
| 333 | | CARDIAC CATHETERIZATION |
| 334 | | CARDIAC STRESS TEST/Exercise Tolerance Test (ETT) |
| 350 | | GERIATRIC PRIMARY CARE |
| 351++ | | ADVANCED ILLNESS COORDINATED CARE (AICC) |
| | 370++ | LTC SCREENING |
| 401 | | GENERAL SURGERY |
| 402 | | CARDIAC SURGERY |
| 403 | | Ear, Nose, and Throat (ENT) |
| 404 | | GYNECOLOGY |
| 405 | | HAND SURGERY |
| 406 | | NEUROSURGERY |
| 407 | | OPHTHALMOLOGY |
| 408 | | OPTOMETRY |
| 409 | | ORTHOPEDICS |
| 410 | | PLASTIC SURGERY |
| | 410210 | SCI PLASTIC |
| 411 | | PODIATRY |
| 412 | | PROCTOLOGY |
| 413 | | THORACIC SURGERY |
| 414 | | UROLOGY |
| | 414451 | IMPOTENCY |
| | 414473 | URODYNAMICS |
| 415 | | VASCULAR SURGERY |
| | 415461 | Aneurysm Detection And Management (ADAM) CLINIC |
| 416 | | AMBULATORY SURGERY EVALUATION BY NON-MD |
| 417 | | PROSTHETIC, ORTHOTICS: EVALUATION, FITTING, and/or MEASURING |
| | 417201 | MAJOR MED |
| | 417451 | WHEEL CHAIR |
| | 417452 | CUSHION |

July 5, 2002

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|-------------------|-----------------|---|
| | 417455 | SHOE/BRACE |
| | 417473 – | ORTHOTIC LAB |
| | 417474 – | PROSTHETICS LAB |
| 418 | | AMPUTATION CLINIC |
| 419 | | ANESTHESIA PRE-operation (OP) and/or POST-OP CONSULTATION |
| 420 | | PAIN CLINIC |
| 421 | | VASCULAR LABORATORY |
| 422 | | CAST CLINIC |
| 423+ | | PROSTHETIC SUPPLY DISPENSED |
| | 423461 | Computer Aided Design (CAD) Computer Aided Modeling (CAM) UNIT |
| 424 ^ψ | | TELEPHONE/SURGERY |
| 425 ^ψ | | TELEPHONE/PROSTHETICS/ORTHOTICS |
| 426 | | WOMEN’S SURGERY |
| 428 ^ψ | | TELEPHONE/OPTOMETRY |
| 429 | | OUTPATIENT CARE IN THE OPERATING ROOM |
| 430 | | CYSTO ROOM UNIT FOR OUTPATIENT |
| 431 | | CHEMOTHERAPY PROCEDURES UNIT-SURGERY |
| 432 | | PRE-BED CARE MD (SURGICAL SERVICE) |
| 433 | | PRE-BED CARE RN (SURGERY) |
| 435 | | SURGICAL PROCEDURE UNIT |
| 436++ | | CHIROPRACTIC CARE IN MEDICAL CENTER |
| | 450485 | Use as credit pairs only. |
| | 450 | Compensation and Pension (C&P) EXAM |
| | 451 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 452 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 453 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 454 | SPECIAL REGISTRY 5 |
| | 455 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 456 | SPECIAL REGISTRY 6 |
| | 457 | TRANSPLANT |
| | 458 | SPECIAL REGISTRY 7 |
| | 459 | SPECIAL REGISTRY 8 |
| | 460 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 461 | SPECIAL REGISTRY 1 |
| | 462 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 463 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 464 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|---|
| | 465 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 466 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 467 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 468 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 469 | SPECIAL REGISTRY 2 |
| | 470 | SPECIAL REGISTRY 3 |
| | 471 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 472 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 473 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 474 | RESEARCH |
| | 475 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 476 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 477 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 478 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 479 | SPECIAL REGISTRY 4 |
| | 480 | COMPREHENSIVE FUNDOSCOPY EXAM This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise. |
| | 481 | BRONCHOSCOPY |
| | 429481 | If Outpatient Bronchoscopy is done by Surgery in the OR |
| | 312481 | If Outpatient Bronchoscopy is done in the Pulmonary Area |
| | 327481 | If Outpatient Bronchoscopy is done by Medicine in the OR |
| | 329481 | If Outpatient Bronchoscopy is done in the Medical Procedure Unit |
| | 435481 | If Outpatient Bronchoscopy is done in “Lumps and Bumps” Surgery Procedure Unit |
| | 482 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 483 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 484 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| | 485 | SPECIAL DSS CREDIT PAIR – LOCALLY DEFINED |
| 501 - | | HOMELESS MENTALLY ILL OUTREACH |
| 502 | | MENTAL HEALTH CLINIC INDIVIDUAL |
| 503 | | MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL |
| 505 | | DAY TREATMENT - INDIVIDUAL |
| 506 | | DAY HOSPITAL - INDIVIDUAL |
| 509+ | | PSYCHIATRY MD - INDIVIDUAL |

July 5, 2002

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|---|
| 510+ | | PSYCHOLOGY - INDIVIDUAL |
| | 510473 - | NEURO PSYCHOLOGY LAB |
| | 510474 ^ψ | PSYCHOLOGY RESEARCH |
| | 510475 - | RESEARCH (USE 510474) |
| | 510509 - | Psychology – Psychiatry (PSO-PSI) |
| 512 | | PSYCHIATRY CONSULTATION |
| 513 | | SUBSTANCE ABUSE – INDIVIDUAL |
| | 513461 | INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE |
| | 513469 | INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE |
| 514 | | SUBSTANCE ABUSE - HOME VISIT |
| 515 - | | CWT/Transitional Residence (TR)-Homeless Chronically Mentally Ill (HCMI) |
| 516 | | Post Traumatic Stress Disorder (PTSD) – GROUP |
| | 516726 | PTSD DOM-AFTERCARE GROUP |
| 519 | | SUBSTANCE USE DISORDER/PTSD TEAMS |
| 520 | | LONG-TERM ENHANCEMENT INDIVIDUAL |
| 521 | | LONG-TERM ENHANCEMENT – GROUP |
| 522 | | Department of Housing and Urban Development (HUD)-VA Shared Housing (VASH) |
| 523 | | OPIOID SUBSTITUTION |
| 524 ^ψ | | ACTIVE DUTY SEX TRAUMA |
| 525 ^ψ | | WOMEN'S STRESS DISORDER TREATMENT TEAMS |
| 527 ^ψ | | TELEPHONE/GENERAL PSYCHIATRY |
| | 527564+ ^ψ | TELEPHONE MH TEAM CASE MANAGEMENT |
| 528 ^ψ | | TELEPHONE/HOMELESS MENTALLY ILL (HMI) |
| 529 | | Health Care for Homeless Veterans (HCHV)/HMI |
| 530 ^ψ | | TELEPHONE/HUD-VASH |
| 531+ | | MENTAL HEALTH PRIMARY CARE TEAM-INDIVIDUAL |
| 532 | | PSYCHOSOCIAL REHABILITATION-INDIVIDUAL |
| | 532713++ | GAMBLING ADDICTION IND |
| 533++ | | MH INTERVENTION BIOMEDICAL CARE INDIVIDUAL |
| | 533707++ | SMOKING CESSATION IND |
| 535 | | MH VOCATIONAL ASSISTANCE - INDIVIDUAL |
| 536 ^ψ | | TELEPHONE/MH VOCATIONAL ASSISTANCE |
| 537 ^ψ | | TELEPHONE/PSYCHOSOCIAL REHABILITATION |
| 538 | | PSYCHOLOGICAL TESTING |
| 540 | | PTSD ClinicalTeam (PCT) POST –TRAUMATIC STRESS- INDIVIDUAL |

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|---|
| 542 ^ψ | | TELEPHONE/PTSD |
| 545 ^ψ | | TELEPHONE/SUBSTANCE ABUSE |
| | 545461 ^ψ | TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE |
| | 545469 ^ψ | TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE |
| 546 ^ψ | | TELEPHONE/MHICM |
| 547 | | INTENSIVE SUBSTANCE ABUSE TREATMENT |
| | 547461 | INTENSIVE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE |
| | 547469 | INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE |
| 550 | | MENTAL HEALTH CLINIC (GROUP) |
| 552 ^ψ | | MENTAL HEALTH INTENSIVE CASE MANAGEMENT (MHICM) |
| 553 | | DAY TREATMENT – GROUP |
| 554 | | DAY HOSPITAL-GROUP |
| 557+ | | PSYCHIATRY - GROUP |
| 558+ | | PSYCHOLOGY - GROUP |
| 559 | | PSYCHOSOCIAL REHABILITATION - GROUP |
| | 559713++ | GAMBLING ADDICTION GRP |
| 560 | | SUBSTANCE ABUSE - GROUP |
| | 560461 | GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE |
| | 560469 | GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE |
| 561 | | PCT-POST TRAUMATIC STRESS – GROUP |
| 562 | | PTSD – INDIVIDUAL |
| 563 | | MENTAL HEALTH PRIMARY CARE TEAM – GROUP |
| 564 ^ψ | | MH TEAM CASE MANAGEMENT |
| 565++ | | MH MEDICAL CARE ONLY - GROUP |
| 566++ | | MH RISK-FACTOR-REDUCTION ED GROUP |
| | 566707++ | SMOKING CESSATION GRP |
| 573+ | | MH INCENTIVE THERAPY - GROUP |
| 574+ | | MH COMPENSATED WORK THERAPY – GROUP |
| | 574513 - | CWT/ SUBSTANCE ABUSE |
| 575 | | MH VOCATIONAL ASSISTANCE - GROUP |
| 576 | | PSYCHOGERIATRIC CLINIC, INDIVIDUAL |
| 577 | | PSYCHOGERIATRIC CLINIC, GROUP |
| 578 | | PSYCHOGERIATRIC DAY PROGRAM |
| 579 ^ψ | | TELEPHONE/ PSYCHOGERIATRICS |
| 580 | | PTSD DAY HOSPITAL |
| 581 | | PTSD DAY TREATMENT |
| 589 | | NON-ACTIVE DUTY SEX TRAUMA |

VHA DIRECTIVE 2002-041

July 5, 2002

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|---------------------------|-------------------------|--|
| 590 | | COMMUNITY OUTREACH HOMELESS VETS BY STAFF OTHER THAN HCHV AND Domiciliary Care for Homeless Veterans (DCHV) PROGRAMS |
| 602 | | CHRONIC ASSISTED HEMODIALYSIS TREATMENT HEMODIALYSIS TREATMENT |
| 603 | | LIMITED SELF CARE HEMODIALYSIS TREATMENT |
| 604 | | HOME/SELF HEMODIALYSIS TRAINING TREATMENT |
| 606 | | CHRONIC ASSISTED PERITONEAL DIALYSIS |
| 607 | | LIMITED SELF CARE PERITONEAL DIALYSIS |
| 608 | | HOME/SELF PERITONEAL DIALYSIS TRAINING |
| 610 | | CONTRACT DIALYSIS |
| 611 ^ψ | | TELEPHONE/DIALYSIS |
| 650 ^ψ | | CONTRACT NURSING HOME DAYS |
| 651 | | STATE NURSING HOME DAYS |
| 652 | | STATE DOMICILIARY HOME DAYS |
| 653 ^ψ | | STATE HOSPITAL CARE |
| 654++ | | NON-VA RESIDENTIAL CARE DAYS |
| 655++ | | COMMUNITY NON-VA CARE |
| 656++ | | Department of Defense (DOD) NON-VA CARE |
| 657++ | | ASSISTED LIVING VENDOR WORK |
| 660++ | | CHIROPRACTIC CARE OUTSIDE VA |
| 670++ | | ASSISTED LIVING – PAID, STAFF |
| 680 ^ψ | | HOME/COMMUNITY HEALTHCARE ASSESSMENT |
| 681 | | VA-PAID HOME/COMMUNITY CARE PROVIDERS |
| 682 ^ψ | | VA-REFERRALS TO HOME/COMMUNITY CARE PROVIDERS |
| | 690 | TELEMEDICINE NOTE: Use as credit pair only. |
| | 691++ | PRE-EMPLOYMENT PHYSICAL MILITARY PERSONNEL |
| | 701 through 711* | *USE AS CREDIT PAIRS ONLY |
| | 701 | HYPERTENSION SCREENING |
| | 702 | CHOLESTEROL SCREENING |
| | 703 | MAMMOGRAM |
| | 704 | PAP TEST |
| | 705 | FOBT - GUIAC SCREENING |
| | 706 | ALCOHOL SCREENING |
| | 707 | SMOKING CESSATION |
| | 708 | NUTRITION |
| | 709 | PHYSICAL FITNESS/EXERCISE COUNSELING |
| | 710 | INFLUENZA IMMUNIZATION |
| | 711 | INJURY COUNSEL/SEAT BELT USAGE |

TABLE A - LIST OF CURRENT DSS IDENTIFIERS (10/1/01) (cont.)

| DSS* ID NUMBER | DSS* ID PAIR | DSS ID NAME |
|--------------------------------|-------------------------|--|
| | 712 ^ψ | HEPATITIS C REGISTRY |
| | 713++ | GAMBLING ADDICTION |
| 725 | | DOMICILIARY OUTREACH SERVICES |
| 726 | | DOMICILIARY AFTERCARE – COMMUNITY |
| 727 | | DOMICILIARY AFTERCARE - VA |
| 728 | | DOMICILIARY ADMISSION SCREENING SERVICES |
| 729 ^ψ | | TELEPHONE/DOMICILIARY |
| 730 | | DOMICILIARY – GENERAL CARE (Event Capture System (ECS)) USE ONLY) |
| 731 | | Psychiatric Rehabilitation Residential Treatment Program (PRRTP) – GENERAL CARE (ECS USE ONLY) |
| 900 - Inactivate 10/1/98 | | SPECIAL SERVICES |
| 999 ^ψ | | EMPLOYEE HEALTH |
| | 999510 ^ψ | PSO-Employee Assistance Program (EAP) - OPTIONAL |

ATTACHMENT C

SUMMARY OF 10/1/2001 NEW AND INACTIVATED DSS IDENTIFIERS

NOTE: The following symbols are used in this attachment:

** Amended use of a Decision Support System (DSS) Identifier.

ψ Work from these stop codes is always non-billable in Medical Care Cost Fund (MCCF). Cost Distribution Report (CDR).

++ New DSS Identifiers

a. **Table B New Stop Codes Added**

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|---------------|-------------|---------|--|
| | 102101++ | 2111.00 | EMERGENCY UNIT. Includes all activities involved in the evaluation and screening of patients in an emergency and/or stretcher room. This includes administrative, physician, nursing, and ancillary services. |
| | 103801++ | 2780.00 | IN- Veterans Integrated Service Network (VISN), PHONE TRIAGE-NOT Department of Veterans Affairs (VA) medical center. Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This Triage care is provided by an In-VISN Phone Triage, not by the VA medical center itself. |
| | 103802++ | 2780.00 | OUT OF VISN, VA PHONE TRIAGE. Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This Triage care is provided by an Out-of-VISN, VA Phone Triage, not by the VA medical center itself. |

VHA DIRECTIVE 2002-041

July 5, 2002

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|--------------------------|------------------------|------------|---|
| | 103803++ | 2780.00 | COMMERCIAL PHONE TRIAGE. Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This VA medical center Health Administration Service (HAS)-recorded Triage care is provided by a contracted Commercial Phone Triage professional staff. |
| 154++ | | 2612.00 | MEG. Records a patient visit for the performance of diagnostic Magnetoencephalography (MEG) exams. Includes technologist services, physician interpretation, technical services, and administrative services. |
| 155++ | | 2612.00 | INFO ASSISTS TECHNOLOGY. Records a patient visit to perform diagnostic functional/structural computerized analysis. This technology, by fusing functional (MEG, Functional Magnetic Resonance Imaging (FMRI), and Electroencephalogram (EEG) information with structural data (Magnetic Resonance Imaging (MRI), Magnetic Resonance Appraisal (MRA) and/or Computerized Tomography (CT)) assists pre-operative evaluation and/or guides intra-operative activity. Includes physician interpretation, technical services and administrative services. |
| | 323691++ | 2130.00 | PRE-EMP PHYS MILITARY PERSONNEL. Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients, if required. This credit pair is specifically for special pre-employment physicals for Peace Corps and Active Duty Military Personnel. <i>691 may be used as a credit pair with other primary stops such as 102, and 301 as required.</i> |

July 5, 2002

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|------------------|----------------|---------|---|
| 351++ | | 2110.00 | ADVANCED ILLNESS COORDINATED CARE (AICC). Records AICC for improved care at the end of life. Provided to patients through coordinated, interdisciplinary provision of medical, nursing, psychosocial services. AICC provides education, counseling, advocacy, care coordination to patients and caregivers. Referral for specialty, or other levels of care, follow-up and overall care management by AICC care Coordinator to improve individual's quality of life who are at the advanced and/or end stage of illness. Includes clinical and administrative services. |
| 436++ | | 2110.00 | CHIROPRACTIC CARE IN MED CTR. Consultation, evaluation, follow-up and/or treatment by a licensed doctor of chiropractic for chiropractic spinal manipulative therapy for musculoskeletal problems of the spine, as specified in Veterans Health Administration (VHA) policy. Care is delivered within a VA medical center by Fee Basis or VA staff provider. Includes clinical services and administrative services. (For chiropractic care delivered outside of a medical center, see Stopcode 660) |
| | 532713++ | 2315.00 | GAMBLING ADDICTION IND. Records individual patient visit with Mental Health (MH) professional: medical physician (MD), psychologist, social worker (SW), or registered nurse (RN), for the purpose of treating gambling addiction. <i>NOTE: This is a new mental health reporting program.</i> |
| 533++ | | 2311.00 | MH INTERVENTION BIOMED CARE IND. For use by mental health clinicians who provide individual services to patients in clinics other than mental health where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. <u>Such non-psychiatric diagnoses would fail to trigger the Global Assessment Functioning (GAF) expectation.</u> Examples of such interventions for non-psychiatric illness include chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-mental health venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-mental health venues for conditions primarily diagnosable under the Diagnostic and Statistical Manual of Mental Diseases, 4 th Edition (DSM IV) will continue to be placed in the appropriate program-specific stop code, with a full multi-axial diagnosis including the GAF |

VHA DIRECTIVE 2002-041

July 5, 2002

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|------------------|----------------|---------|--|
| | 533707++ | 2311.00 | SMOKING CESSATION IND. Records Individual patient visit with MH professional: physician, psychologist; social worker, or nurse, to assist smoking cessation. No GAF required. |
| | 559713++ | 2314.00 | GAMBLING ADDICTION GRP. Records MH professional: physician, psychologist, social worker or nurse, for the purpose of providing group therapy for gambling addiction. <i>NOTE: This is a new mental health reporting program.</i> |
| 565++ | | 2310.00 | MH MEDICAL CARE ONLY-GROUP. For use by MH clinicians who provide group services to patients in clinics other than mental health where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. Such non-psychiatric diagnoses would fail to trigger the GAF expectation. Examples of such interventions for non-psychiatric illness include chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-mental health venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-mental health venues for conditions primarily diagnosable under DSM IV will continue to be placed in the appropriate program-specific stop code, with a full multi-axial diagnosis including the GAF. |
| 566++ | | 2310.00 | MH RISK-FACTOR-REDUCTION ED GR. Captures workload, <u>primarily psychoeducational</u> in nature, provided in group sessions. Groups typically are informational in nature and provided by mental health personnel, though they may teach strategies for accomplishing some therapeutic goal (smoking cessation, diabetic education, cardiac rehabilitation, etc). Such groups are typically time-limited and the visits are coded under Current Procedural Terminology (CPT)-4 as patient "counseling and/or risk reduction groups" (99411,99412). <u>A GAF is not required.</u> Where services such as smoking cessation groups are provided as interventions, then full diagnostic codes (nicotine dependence and GAF) are to be applied. These services are typically coded as Group Therapy under the CPT-4 system and are <u>NOT eligible for this stop code.</u> These latter patients should be placed in the appropriate program-specific group therapy stop code, and the appropriate diagnostic code(s), including GAF's are to be applied. |
| | 566707++ | 2310.00 | SMOKING CESSATION GRP. Records MH professional: physician, psychologist, social worker, or nurse, providing primarily psycho-educational information in group sessions for the purpose of assisting smoking cessation. No GAF required. |

VHA DIRECTIVE 2002-041
July 5, 2002

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|---------------|-------------|-----|--|
| 654++ | | N/A | NON-VA RESIDENTIAL CARE DAYS. Records number of non-VA Residential Home days which the patient had in a VA-Paid for that month. Non-VA Special Residential Care (e.g. Psychiatric or Alcohol Rehabilitation programs.) <i>Not for use on Patient Care Encounter (PCE). Only for use on Event Capture System (ECS).</i> |
| 655++ | | N/A | COMMUNITY NON-VA CARE. Pilot Hawaii program only in Fiscal Year (FY) 2002. This stopcode is to be <u>used only in ECS – Never PCE.</u> |
| 656++ | | N/A | DOD NON-VA CARE. Pilot Hawaii program only in FY 2002. This stopcode is to be <u>used only in ECS – Never in PCE.</u> |
| 657++ | | N/A | ASSIST LIVING VENDOR WORK. Records (bedday) workload for VA-Paid Assisted Living Facilities (Use only for V20 Pilot in FY 2002. <u>Never in PCE.</u>) |
| 660++ | | N/A | CHIROPRACTIC CARE OUTSIDE VA. Consultation, evaluation, follow-up and/or treatment by a licensed doctor of chiropractic for chiropractic spinal manipulative therapy for musculoskeletal problems of the spine, as specified in VHA policy. Care is not delivered within a VA medical center. Includes clinical services and administrative services. (For chiropractic care delivered within a medical center, see Stopcode 436) |
| 670++ | | N/A | ASSIST LIVING VHA-PAID, STAFF. VHA staff coordinating and providing evaluation for patients in VHA-paid Assisted Living facilities. (Mainly V20 pilot in FY 2002.) |

b. New Secondary Stop Codes Added

| DSS ID NUMBER | DSS ID PAIR | CDR | DESCRIPTION |
|---------------|-------------|-----|---|
| | 370++ | | Long-term Care (LTC) SCREENING. Records the screening or assessment for consideration of long-term care placement for a geriatric patient by a health care professional (RN, SW and/or MD). The primary stop would be the clinic providing the LTC screening and/or assessment. |
| | 713++ | | GAMBLING ADDICTION. Treatment for gambling addiction in a non-MH setting. The primary stop would be the clinic providing the treatment. |
| | 691++ | | PRE-EMPLOYMENT PHYS MILITARY PERSONNEL. Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients as required. This credit pair is specifically for special pre-employment physicals for Peace Corps and Active Duty Military Personnel. <i>691 may be used as a credit pair with other primary stops such as 102, and 301 as required.</i> |

ATTACHMENT D

EXISTING PRIMARY DECISION SUPPORT SYSTEM (DSS) OR STOP CODE
DEFINITION CHANGES (TABLE C)

Table C Existing PRIMARY Stop Code Definition Changes

| DSS ID NUMBER | Cost Distribution Report (CDR) | DESCRIPTION |
|---------------------|---|--|
| 166 | 2610.00 | CHAPLAIN SERVICE – INDIVIDUAL. Records visit for an individual receiving liturgical, sacramental or worship spiritual care, provided by a chaplain. Includes administrative services. |
| 167 | 2610.00 | CHAPLAIN SERVICE – GROUP. Records visit for liturgical, sacramental or worship spiritual care to more than one individual in a group setting by a chaplain. Includes administrative services. |
| 218 | 2611.00 | CAT Blind Rehabilitation. Computer Assisted Training (CAT) provides specialized services to eligible blinded veterans through comprehensive adaptive computer needs assessment, prescription, training, and issuance of equipment. <u>Normally veterans receive computer training in a Blind Rehabilitation Center;</u> however, for those veterans for various reasons who are not able to attend the inpatient program, this training is provided in their home environment. |
| 423 | 2614.00 | PROSTHETIC SUPPLY DISPENSED. Records patient visit for consultation, evaluation, education, information, and/or counseling concerning eligibility for prosthetic services, appliances, devices and benefit claims and prescription processing. Includes prosthetic representative and administrative services. Includes dispensing of Prosthetic Supplies to patients as available. |
| 509 | 2311.00 | PSYCHIATRY – MD INDIVIDUAL. Use when the physician (MD)-Psychiatrist care is not delivered in an interdisciplinary clinic setting such as a Mental Health (MH) Clinic or Post-traumatic Stress Disorder (PTSD) Clinical Team. Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional and behavioral disorders. May prescribe medications. Includes <u>physician</u> and administrative services. |
| 510 | 2311.00 | PSYCHOLOGY – INDIVIDUAL. Use when the Psychologist care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team. Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a psychologist. Includes administrative services. |

VHA DIRECTIVE 2002-041

July 5, 2002

| DSS ID NUMBER | Cost Distribution Report (CDR) | DESCRIPTION |
|------------------------------|---|---|
| 531 | 2331.00 | MH PRIMARY CARE TEAM – INDIVIDUAL. Records individual care provided to patients assigned to a MH Primary Care Team, characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and, (f) patient and non-professional care giver education and training. Includes clinical, ancillary and administrative services. According to Veterans Health Administration (VHA) policy. |
| 557 | 2310.00 | PSYCHIATRY – MD GROUP. Use when the MD-Psychiatrist care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team. Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional and behavioral disorders. May prescribe medications. Includes <u>physician</u> and administrative services. |
| 558 | 2310.00 | PSYCHOLOGY – GROUP. Use when the Psychologist care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team. Records individual patient visit for the purpose of evaluation, follow-up, and treatment provided by a psychologist. Includes administrative services. |
| 563 | 2330.00 | MH PRIMARY CARE TEAM – GROUP. Records care provided to a group of patients assigned to a MH Primary Care Team characterized by a coordinated interdisciplinary approach consisting of: (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non-professional care giver education and training. Includes clinical and administrative services. According to VHA policy. |
| 573 | 2314.00 | MH INCENTIVE THERAPY-GROUP. Records patient visit for, or work activity in, the Incentive Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary, or any other service other than Physical Medicine and Rehabilitation Service (PM&RS). This is a rehabilitation program provided under Title 38 United States Code (U.S.C.) 618(A), which authorizes assignment of patients to various in-hospital work situations. Pay scale is up to one-half minimum wage. This program is supported by medical care funds. NOTE: <i>A GAF is not required for this stop.</i> |

| DSS ID NUMBER | Cost Distribution Report (CDR) | DESCRIPTION |
|---------------------|--------------------------------------|---|
| 574 | 2314.00 | MH COMPENSATED WORK THERAPY (CWT) GROUP. Records patient visit for evaluation for, or work activity in, the CWT/Veterans Industries (VI) Program provided by Psychology, Psychiatry, Social Work, Domiciliary, or other service other than PM&RS. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the Department of Veterans Affairs (VA) facility. NOTE: <i>A GAF is not required for this stop.</i> |

ATTACHMENT E

EXISTING SECONDARY STOP CODE DEFINITION CHANGES (TABLE D)

Attachment E. Existing Secondary Stop Code Identification Changes (Table D). **NOTE:** *There is no attachment E in this, the Fiscal Year (FY) 2002 version of the Decision Support System (DSS) Outpatient Identifiers, directive; however, there may be an Attachment E in future FY DSS Directives.*

July 5, 2002

ATTACHMENT F

STOP CODES 100 – 299 SERIES INCLUDING OBSERVATION (290-299)

1. Occasion of Service Stop Codes Ancillary List

a. **Definition.** An occasion of service is a specified identifiable instance of a technical and/or administrative service involved in the care of a patient or consumer, which is not an encounter; that is, it does not include the exercise of independent medical judgement in the overall diagnosing, evaluating, and/or treating the patient's condition. An occasion of service is the result of an encounter (e.g., tests or procedures ordered as part of an encounter). **NOTE:** *Clinical laboratory tests, radiological studies, physical medicine interventions, medication administration, and vital sign monitoring, are all examples of occasions of service.* A patient may have multiple occasions of service per encounter.

b. **Operationally.** These are stop codes which pass to the Austin Automation Center (AAC) without diagnostic coding because there is no prompt to answer International Classification of Diseases-9th Edition-Clinical Modification (ICD-9-CM) classification questions (i.e., provider name, procedure code and diagnosis code).

c. **Occasions of Service (OOS).** The following stops are always OOS, i.e., are exempt from requiring an ICD-9-CM diagnostic code. Decision Support System (DSS) Identifiers from Radiology Packages, including Nuclear Medicine, and from the Laboratory Package are passed automatically when registrations and accessions of tests are made in their respective packages. Electrocardiogram (EKG) encounters must be entered through Patient Care Encounter (PCE), Ambulatory Information Capture System (AICS), Text Integration Utility (TIU), or Appointment Management.

(1) 105 Radiology

(2) 109 Nuclear Medicine

(3) 108 Laboratory

(4) 107 EKG

NOTE: *Other stop codes can be designated as OOS on the Health Administration Service (HAS) software. These include all the stop codes in the "exempt column on the Veterans Health Information Systems and Technology Architecture (VistA) in Attachment K unless paired with a non-exempt credit pair.*

2. **Telephone Stop Codes.** See stop code list in Attachment L for all current stop codes indicating telephone care. When these stops are used, each Department of Veterans Affairs (VA) medical center may select one of the following three current procedural terminology (CPT) codes. Do not bill telephone.

VHA DIRECTIVE 2002-041**July 5, 2002**

a. **99371.** Telephone call by a physician to patient or for consultation or medical management or for coordinating medical management with other health care professionals, (e.g., Nurses, therapists, social workers, nutritionists, physicians, pharmacists); simple or brief, (e.g., to report on tests and/or laboratory results, to clarify or alter previous instructions, to integrate new information from other health professionals into the medical treatment plan, or to adjust therapy).

b. **99372.** Intermediate (e.g., to provide advice to an established patient on a new problem, to initiate therapy that can be handled by telephone, to discuss test results in detail, to coordinate medical management of a new problem in an established patient, to discuss and evaluate new information and details, or to initiate new plan of care).

c. **99373.** Complex or lengthy (e.g., lengthy counseling session with anxious or distraught patient, detailed or prolonged discussion with family members regarding seriously ill patient, lengthy communication necessary to coordinate complex services of several different health professionals working on different aspects of the total patient care plan).

3. Home Based Primary Care (HBPC)

NOTE: The phrase HBPC has been updated from hospital-based home care (HBHC) to HBPC. Each VA medical center should ensure the name is changed (reference Veterans Health Administration (VHA) Directive 96-051).

| DSS ID NUMBER | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|---------------------|--|--|
| 170 | N/A | HBPC - PHYSICIAN | HBPC. Records evaluations, treatment orders, and follow-up for patients in HBPC, etc. |
| 171 | N/A | HBPC – Registered Nurse (RN), Registered Nurse Practitioner (RNP), Physician Assistant (PA) | HBPC. Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care. |
| 172 | N/A | HBPC - NURSE EXTENDER | HBPC. Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care. |
| 173 | N/A | HBPC - SOCIAL WORKER | HBPC. Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling. |

| DSS ID NUMBER | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|---------------------|--|--|
| 174 | N/A | HBPC - THERAPIST | HBPC. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establishes therapeutic program to maintain function. |
| 175 | N/A | HBPC - DIETITIAN | HBPC. Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems. |
| 176 | N/A | HBPC - CLINICAL PHARMACIST | HBPC. Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications. |
| 177 | N/A | HBPC - OTHER | HBPC. Records professional, home health aide and other services provided. |
| 177201 | | HBPC-Physical Medicine and Rehabilitation Service (PM&RS) | HBPC. Records professional PM&RS and other services provided. |
| 177210 | | HBPC-Spinal Cord Injury (SCI) | HBPC. Records professional SCI clinical services provided. |
| 178 | 2780 | HBPC TELEPHONE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with Human Immunodeficiency Virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |

** Amended use of a DSS ID

VHA DIRECTIVE 2002-041**July 5, 2002**

| DSS ID NUMBER | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|---------------------|---|--|
| 179 | N/A | TELE-HOME CARE TECHNOLOGY UNIT | Records visits by VA employees using tele-visual means to patients in their homes to evaluate and/or treat wound, ulcerated areas, exercise, patient appearance, advise on patient administered treatment, review pills, etc. The encounter is recorded on a permanent visual tape with electronically recorded nursing notes. Applies to those VA medical centers which have made capital investment in Tele-Home Care Technology. <i>NOTE: For Telemedicine, use credit pair 690.</i> |

4. Observation Reporting. Observation reporting is a specially defined type of extended outpatient care (see 2001 Observation CPT code definition).

5. Use Observation DSS Identification (ID) Codes in the Outpatient Setting

a. Observation Data Reporting

(1) Criteria. Observation cases must meet the criteria set up by the Centers for Medicare and Medicaid Services (CMS) (Medicare) and by the 2001 CPT code criteria.

(2) Background

(a) In Fiscal Year (FY) 1997, it was shown through the results of the FY 1997 National Stop Code Usage Survey that Observation cases were found to be reported in no consistent manner between sites, over a wide range of DSS Identifiers. In FY 1997, these observation cases were reported both in the Medicine and Surgery series as well as in the Admit/Screening (102-101); Medical Surgical Day Unit (MSDU) (328); and Ambulatory Care work units. For FY 1998, seven Observation stop codes were created, specifically for Observation-only work (290-296).

(b) In FY 1998 (since October 1, 1997), most VA medical centers have followed the Observation stop code guides in Directive 96-057, Change 3. This permits clear identification of all Observation work without negatively impacting the Cost Distribution Report (CDR), DSS, Performance Measures and Medical Care Cost Fund (MCCF). Later, another directive "Observation Directive," was developed. This was designed to compensate for the VistA Dietetics and Unit Dose drug packages, which did not serve outpatients at that time, (as a type "software workaround"). This inpatient Observation Directive guided VA medical centers to admit Observation patients to one of seven new Observation treating specialties in the Patient Treatment File (PTF), thus requiring for each Observation stay, a discharge summary. This directive made Revenue Modeling and coding of patients not possible on DSS or other revenue modeling systems. In FY 2002, DSS will create, on the DSS system only, OP encounters, i.e., all patient cases in observation treating specialties, with the appropriate outpatient stopcode encounter. These will be posted on DSS as the Daily Cost Resource (DCR) Profiler encounters and stopcoded with one of the 7 observation stopcodes. This allows DSS to function as CMS

does for these encounters. **NOTE:** *It enters all VHA observation work into outpatient encounters for more reliable cost comparisons.*

(c) For use in FY 1998 and thereafter, the National FY 1998 Stop Code Sub-Task Force on Observation Care Reporting developed the seven Observation Stop Codes (290 through 296) to uniformly report observation care by providing clinical service. These have been available and used by most VA medical centers for the entire FY 1998. This is especially important for those VA medical centers who have major hardship (i.e., where admissions to specific bed sections or wards is difficult, using any PTF admissions for Observation Care.

b. **Action.** As a major principle, all Observation Care that is to be designated by the VA medical center for outpatient stop code reporting should be reported only by one of the seven outpatient Observation stop codes, in the primary position, with the appropriate CPT and ICD-9-CM codes.

(1) The current CMS and CPT code definitions of Observation Care applies to the use of these seven new Observation stop codes and to the use of the standard Observation CPT codes. Credit pairs describing the work unit producing the observation work can be used.

(2) For VHA Observation Care that meets CMS and CPT code criteria, only seven Observation stop codes should be used:

- 290 – Observation Medicine
- 291 – Observation Surgery
- 292 – Observation Psychiatry
- 293 – Observation Neurology
- 294 – Observation Blind Rehab
- 295 – Observation Spinal Cord
- 296 – Observation Rehabilitation

NOTE: *From FY 1998 onward, no stop code should be used in the primary position for Observation Care other than one of these seven "Observation Only" stop codes.*

6. New Stop Codes in FY 2002 in the 100-299 Series

- 154 MEG
- 155 INFO ASSISTS TECHNOLOGY

7. New Stop Code Pairs for FY 2002 in the 100-299 series

- 102101 EMERGENCY UNIT
- 103801 IN-VISN PHONE TRIAGE – NOT VAMC
- 103802 OUT OF VISN, VA PHONE TRIAGE
- 103803 COMMERCIAL PHONE TRIAGE

July 5, 2002

ATTACHMENT G

**STOP CODES 300 SERIES
DEFINITIONS FOR PRIMARY CARE DATA REPORTING**

1. Definitions. The term “Primary Care” has caused considerable confusion in the Department of Veterans Affairs (VA) in relation to stop codes and workload definitions. There are four operational meanings of Primary Care in the Veterans Health Administration (VHA) which represent very distinct functionalities.

a. **Primary Care as a Service Line of the Medical Center.** Primary Care as a Service Line of the medical center, like the Medical-Surgical, Mental Health, and Extended Care (Long-term Care (LTC)) Service Lines.

b. **Primary Care as a Clinical Service Product (Intermediate Product).** Primary Care as a Clinical Service Product (Intermediate Product), i.e., a set of prevention or annual physical or other care products needing to be tracked by enrollee for performance measures.

c. **Primary Care as a Form of Health Care Practice or Specialty.** Primary Care as a form of health care practice or specialty for medical physicians (MDs), Physician Assistants (PAs) and Nurse Practitioners. In VHA outpatient areas, these workers are represented by stop code designated, Decision Support System (DSS) production units.

d. **Primary Care as a Managed Care Version of Case Manager.** Primary Care as a managed care version of case manager (case management) where every Primary Care Patient is assigned to a Primary Care Team and a Primary Care Provider, i.e., a patient with a chronic heart disease is assigned to a cardiologist as “primary care physician” and that patient, from then on, becomes part of this specialist’s primary care panel. It is critical to use the VHA’s Veterans Health Information Systems and Technology Architecture (VistA) Primary Care Management Module (PCMM) package to keep track of VHA enrollees and/or physician. PCMM was used to extract the population for the Primary Care Enrollment performance measure in Fiscal Year (FY) 99.

***NOTE:** Although DSS data can be used to gain information about all four of these Primary Care entities, DSS Identifiers (stop codes) are related only to subparagraphs 1b and 1c.*

2. Recommended Codes for Primary Care Reporting. DSS Identifiers are used to define work areas or production units for clinicians who are specialized in the practice of Primary Care (e.g., DSS Identifiers 323 and 350), (see subpar. 1c). DSS Identifiers are also used to describe the stable, cost products provided to patients, that constitute primary care services (see subpar. 1b).

a. **Primary DSS Identifiers for Primary Care**

(1) The VHA stop codes in the primary position that relate to primary care work (or production) units and primary care products are:

(a) 323 - Primary Care-Medicine

July 5, 2002

- (b) 322 - Women's Clinic
- (c) 350 - Primary Care-Geriatrics
- (d) 531 - Mental Health Primary Care Team-Individual
- (e) 563 - Mental Health Primary Care Team-Group
- (f) 170177 - Home Based Primary Care (HBPC)

b. **Secondary DSS Identifiers for Primary Care.** For medical specialty clinics that also provide primary care products, 323 can be appended as a secondary code in the six character DSS Identifier to indicate the clinic in that specialty that provides specifically primary care services (e.g., 303-323 for cardiologist's clinic providing primary care.)

3. Information on Selection of Performance Measure Subsets Using Primary and Secondary DSS Identifiers for Primary Care

- a. There are two databases being used to extract Primary Care Performance Measure data:
 - (1) The PCMM module mentioned for enrollment; and
 - (2) DSS Identifiers in the National Patient Care Database (NPCD) related to Primary Care for sample selections for customer satisfaction, and for some other measurements.
- b. The DSS Identifiers used in defining Performance Measure data sets should reflect where primary care products are provided. The primary care products are determined by using the Primary Care-defined DSS Identifiers (323, 322, 350, 531, 563). These codes may be in the primary or secondary position in the clinic setup.
- c. If the set of products desired is only for physician workload versus some other clinician, the secondary code should be reviewed. If a secondary code is present, other than a local stop, this indicates that a non-physician provided the primary care services. Another method to check for physician as provider is to review the value for the "practitioner-type" reported on the local Patient Care Encounter (PCE), or on NPCD, for the encounter and to determine if that value is in the range of physician practitioners.
 - (1) Use of the secondary credit pair to designate primary care teams is preferred because it enables sites to set-up separate DSS departments for each primary care team more easily using the feeder key (FDR KEY) (six character DSS Identifier).

(2) However, many sites prefer to use the alpha codes for the DSS designators for primary care teams' DSS intermediate products. The caveats here are:

(a) In setting up DSS feeder keys or products, be careful to do so by examination of the entire FED KEY, specifically the last five characters.

(b) Be sure to use the DSS suffix as "ATEM, BTEM, etc.," that have the alpha character that identifies the team in the first (not fourth) position. In DSS, sometimes the fourth position does not show up so clear identification of the teams product could be difficult if the alpha designator is not in the first position.

4. Guidelines for Primary Care Team Area Stop Code Use: Using DSS Identifiers for DSS Primary Care Departments and for DSS Intermediate Products

To designate a Primary Care team with DSS identifiers, two approaches are feasible:

a. Recommendations were made in DSS to code the Primary Care Teams using the credit pairs: local codes, such as, Special Registry 1 (461) or Special Registry 2 (469) to designate Team 1, Team 2, etc., or the blue team or the gold team, etc. See the following example:

| Primary Code | Secondary Code | National Alpha Code | Description |
|--------------|----------------|---------------------|--|
| 323 | 461 | NURS | Nurse run clinic for the Primary Care Team 1 or the blue team. |
| 323 | 469 | NURS | Nurse run clinic for the Primary Care Team 2 or the gold team. |
| 323 | 461 | SOCW | Social work run clinic for the Team 1 or the Primary Care blue team. |
| 323 | 461 | RESI | Resident run clinic for the Primary Care Team 1 or the blue team. |

b. Historically, when DSS was implemented, a third identification code-(4 character Alpha code) was added to the primary and secondary stop codes. A national 4-character Alpha code list for use with the DSS stop code worksheet VistA functionality was distributed with the DSS VISTA software and is updated occasionally (see current list in Att. O). This allowed an additional level on which to try to identify clinic work products for DSS costing. Thus alternatively, for DSS products only, a site can select to use the National Alpha codes, such as, ATEM or BTEM, to designate the primary teams. See following example:

VHA DIRECTIVE 2002-041**July 5, 2002**

| Primary Code | Secondary Code | National Alpha Code | Description |
|---------------------|-----------------------|----------------------------|--|
| 323 | 117 | ATEM | Nurse run clinic for the Primary Care blue team. |
| 323 | | ATEM | Physician run clinic for the Primary Care blue team. |
| 323 | 125 | BTEM | Social work run clinic for the Primary Care gold team. |
| 323 | 461 | NURS | Nurse run clinic for the Primary Care Team 1 or the blue team. |
| 323 | 469 | NURS | Nurse run clinic for the Primary Care Team 2 or the gold team. |
| 323 | 461 | SOCW | Social work run clinic for the Team 1 or the Primary Care blue team. |
| 323 | 461 | RESI | Resident run clinic for the Primary Care Team 1 or the blue team. |
| 323 | 461 | NURS | Nurse run clinic for the Primary Care Team 1 or the blue team. |
| 323 | 469 | NURS | Nurse run clinic for the Primary Care Team 2 or the gold team. |
| 323 | 461 | SOCW | Social work run clinic for the Team 1 or the Primary Care blue team. |
| 323 | 461 | RESI | Resident run clinic for the Primary Care Team 1 or the blue team. |

c. Other primary care done in a specialty clinic would be designated with the 323 as a credit pair to the specialty clinic; see the following example:

| Primary Code | Secondary Code | National Alpha Code | Description |
|---------------------|-----------------------|----------------------------|---|
| 303 | 323 | | Cardiologist run clinic providing primary care. |

NOTE: This second option does not help the site determine primary care team work units by stop code at local VA medical center or on Austin Automation Center (AAC) Statistical Analysis System (SAS) Outpatient Clinic (OPC) file.

ATTACHMENT H

STOP CODE 400 SERIES, AMBULATORY SURGERY DATA REPORTING

1. Ambulatory Surgery Data Reporting in Three Specific Components

a. In Fiscal Year (FY) 1999, based on a National Decision Support System (DSS) Stop Code Use 1999 Survey, the following general guidelines were developed for the Veterans Health Administration (VHA) Ambulatory Surgery Reporting. Specific code definitions can be found in Attachment J, Table F.

(1) The Ambulatory Surgery process can be composed of three steps (or those specific components): preparation for surgery, surgery, and post-operative care.

(2) The choice of which code to use will be determined by three factors:

(a) Whether the surgery is performed in an Operating Room (OR) or specialty procedure unit,

(b) What types of procedures are done, and

(c) What type of physician is performing the surgery.

NOTE: Using code 117 – Nursing is a local decision, but if it is used, it should be confined to a credit pair.

b. Preparation for Surgery

(1) A good choice of codes to document pre-operative work would be the codes **416** – Ambulatory Surgery Evaluation by non-medical physician (Non-MD) and/or **419** – Anesthesia Pre-Operation (OP) and/or Post-Operation Consultation (Pre-OP/Post-OP Consult). These codes can be adapted to be used the same day of surgery or days in advance.

(2) The following codes should only be used for pre-operative work done prior to a hospital admission, not for outpatient Ambulatory Surgery. The codes are; **331**- Pre-Bed Care MD (Medical Service), **332**- Pre-Bed Care RN (Medical Service), **432**- Pre-Bed Care MD (Surgical Service) And **433** – Pre-Bed Care RN (Surgery).

c. OR

(1) Code **429** – Outpatient Care in the OR - should be used for the majority of procedures done by surgeons in an OR.

(2) Code **327** – Medical Physician Performing Invasive OR Procedure is - also available to record procedures if done by a medical physician as the primary operator in an OR. **NOTE:**

VHA DIRECTIVE 2002-041

July 5, 2002

Both these codes include room preparation, OR services and post-operative recovery room time. Either can be set up as separate locations to be used for automatic data transfer from the Surgery package, and the code (429 or 327) should be in the primary stop code position.

d. **Other (Non-OR) Invasive Procedure Units.** There are several codes available to define specific (non-OR) invasive procedure units. If procedures are done in a unit or suite, these codes should be in the primary stop code position.

(1) Codes include: **321**- GI Endoscopy, **330** – Chemotherapy Procedures Unit (Medicine), **333** – Cardiac Catheterization, **334**- Cardiac Stress Test ad/or Exercise Tolerance Test (ETT), **329** – Medical Procedure Unit, **430** – Cysto Room Unit For Outpatient, **431** – Chemotherapy Procedures Unit (Surgery), **435** – Surgical Procedure Unit. **NOTE:** *It is also appropriate to use these codes as a secondary stop code if the site wishes to document invasive procedures done in other areas. This may be necessary if the site does not have specialty units established, and performs procedures in regular clinic areas.*

(2) Codes **480** – Fundoscopy and **481** – Bronchoscopy are only to be used in the secondary position.

e. Post-Operative Care

(1) Two codes which are available for specific post-operative care are: Code **419** – Anesthesia Pre-OP/Post-OP Consult and Code **328** – Medical and/or Surgical Day Unit (MSDU). These codes are used for Anesthesia Follow-up (419) and for some post-operative nurse care if the patient was followed in the Medical Surgical Day Unit (328).

(2) Codes **429** – Outpatient Care in the OR, and **327** – Medical MD Performing Invasive OR Procedure - do include recovery room time and, therefore, may not need an additional clinic visit.

f. Unscheduled Procedures

(1) VHA has a national outpatient database for which the DSS Identifier known as Primary and Secondary Stop Code Pair performs a service identifying the type of clinical work department providing care. For this reason, sites are encouraged to use these codes not only for scheduled procedures, but also for unscheduled procedures. Clinics should be available to record procedures performed in suites or units as well as other clinic areas where invasive procedures are performed.

(2) If an unscheduled procedure becomes necessary during a regular clinic visit, the Unscheduled Visit feature of the Scheduling Package should be used to record a visit in such a clinic. **NOTE:** *This only applies if the procedure does not pass to Patient Care Encounter (PCE) by a link established in the non-OR component of the Surgery Package.* Documenting procedures in this way will give DSS unique products and give a fuller picture for standardization purposes. **NOTE:** *The workload may also be reflected on the site's Cost Distribution Report (CDR). These benefits cannot be achieved through Current Procedural Terminology (CPT) coding alone.*

g. **Examples of Non-OR Coding Possibilities**

| NON-OR PROCEDURES | DSS ID | DESCRIPTION |
|-------------------|--------|--|
| BRONCHOSCOPY | 312481 | Bronchoscopy done in Pulmonary Clinic |
| BRONCHOSCOPY | 329481 | Bronchoscopy done in medical procedure unit |
| DERM BIOPSIES | 304329 | Biopsies done in Dermatology Clinic |
| FUNDOSCOPY | 306480 | Fundoscopy exam done in Diabetes Clinic |
| FUNDOSCOPY | 407480 | Fundoscopy exam done in Ophthalmology Clinic |
| GI ENDOSCOPY | 307321 | Endoscopy done in Gastroenterology Clinic |
| GI ENDOSCOPY | 321 | Endoscopy done in Endoscopy suite |
| LIVER BIOPSIES | 307329 | Biopsies done in a Gastroenterology Clinic |
| LIVER BIOPSIES | 435307 | Biopsies done in Non-OR suite by Surgery |
| RENAL BIOPSIES | 313329 | Biopsies done in a Renal Clinic |

2. **General and Sub-Specialty Surgical DSS Identifiers**

a. **General Surgery**

401 – General Surgery

b. **Sub-Specialty Identifiers**

402 – Cardiac Surgery

403 – Ear, Nose, and Throat (ENT)

404 – Gynecology

405 – Hand Surgery

406 – Neurosurgery

407 – Ophthalmology

408 – Optometry

409 – Orthopedics

410 – Plastic Surgery

411 – Podiatry

412 – Proctology

413 – Thoracic Surgery

414 – Urology

415 – Vascular Surgery

417 – Prosthetic, Orthotics: Evaluation, Fitting, and/or Measuring

July 5, 2002

423 – Prosthetic Supply Dispensed

3. Ambulatory Surgery Identifiers

a. Pre-Op

416 – Ambulatory Surgery Evaluation by other than a medical physician (MD)

419 – Anesthesia Pre-op and/or Post-op Consult

b. Operation

429 – Ambulatory Surgery OR or Regular OR

430 – Cysto Room for Outpatients

c. Other Non-OR Invasive

431 – Chemotherapy Procedures Unit

435 – Surgical Procedure Unit

436 – Chiropractic Care in Medical Center

d. Pre-Hospital Admissions Work

432 – Pre-bed Care by Surgical Physician

433 – Pre-bed Care by Nurse

4. Surgical Clinic, Laboratory, and Special Exam Identifiers

418 – Amputation Clinic

420 – Pain Clinic

421 – Vascular Laboratory

422 – Cast Clinic

424 – Telephone Clinic and/or Surgery

425 – Telephone Clinic and/or Prosthetics-Orthotics

426 – Women's Surgical Clinic

428 – Telephone Clinic and/or Optometry

480 – Comprehensive Fundoscopy Exam

5. Mandatory Identifier Pairs

410-210 – Spinal Cord injury (SCI) Plastic Surgery

414-451 – Impotency Clinic

414-473 – Urodynamics Clinic

415-461 – Aneurysm Detection and Management (ADAM) Clinic

417-201 – Major Medical and/or Prosthetics-Orthotics

417-451 – Wheelchair

417-452 – Cushion

417-455 – Shoe and/or Brace
417-473 – Orthotic Lab
423-461 – Cad Cam Unit

423-473 – Prosthetic Laboratory

* -450 – Compensation and Pension (C&P) Exams

* -481 – Bronchoscopy

321481 If outpatient Bronchoscopy done in Endoscopy Room

327481 If outpatient Bronchoscopy done in the OR by Medicine

329481 If outpatient Bronchoscopy done in the Ambulatory Procedures Unit

429481 If outpatient Bronchoscopy done by Surgery in the OR

435481 If outpatient Bronchoscopy done in “Lumps and Bumps” Surgery
Procedure Unit

* Represents the service or subspecialty clinic doing the exam, i.e., 315-450 for Neurology
Compensation and Pension (C&P) or 401 and/or 450 for General Surgery C&P

ATTACHMENT I

STOP CODE 500-999 SERIES, MENTAL HEALTH AND OTHER

1. Changes in Mental Health Codes Fiscal Year (FY) 2002

a. **New Primary Decision Support System (DSS) Identifiers** (with Cost Distribution Report (CDR) account number, and the DSS Identification (ID) name).

| DSS ID NUMBER | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|-----------------|--|--|
| 533 | | MENTAL HEALTH, (MH) INTERVENTION BIOMED CARE INDIVIDUAL | For use by mental health clinicians who provide individual services to patients in clinics other than mental health where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. <u>Such non-psychiatric diagnoses would fail to trigger the Global Assessment Functioning (GAF) expectation.</u> Examples of such interventions for non-psychiatric illness include chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-mental health venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-mental health venues for conditions primarily diagnosable under DSM IV will continue to be placed in the appropriate program-specific stop code, with a full multi-axial diagnosis including the GAF |
| 565 | | MH, MEDICAL CARE ONLY-GROUP | For use by mental health clinicians who provide group services to patients in clinics other than mental health where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. Such non-psychiatric diagnoses would fail to trigger the GAF expectation. Examples of such interventions for non-psychiatric illness include chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-mental health venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-mental health venues for conditions primarily diagnosable under the Diagnostic and Statistical Manual of Mental Diseases, 4 th Edition (DSM IV) will continue to be placed in the appropriate program-specific stop code, with a full multi-axial diagnosis including the GAF. |
| 566 | | MH RISK FACTOR-REDUCTION EDUCATIONAL GROUP | Captures workload, <u>primarily psychoeducational</u> in nature, provided in group sessions. Groups typically are informational in nature and provided by mental health personnel, though they may teach strategies for accomplishing some therapeutic goal (smoking cessation, diabetic education, cardiac rehabilitation, etc). Such groups are typically time-limited and the visits are coded under Current Procedural Terminology (CPT)-4 as patient "counseling and /or risk reduction groups" (99411,99412). <u>A GAF is not required.</u> Where services such as smoking cessation groups are provided as |

VHA DIRECTIVE 2002-041

July 5, 2002

| DSS ID NUMBER | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|----------|--------------------------------------|--|
| | | | interventions, then full diagnostic codes (nicotine dependence and GAF) are to be applied. These services are typically coded as Group Therapy under the CPT-4 system and are <u>NOT</u> eligible for this stop code. These latter patients should be placed in the appropriate program-specific group therapy stop code, and the appropriate diagnostic code(s), including GAFs are to be applied. |
| 654 | | NON-VA RESIDENTIAL CARE DAYS | Records number of non-VA residential home days which the patient had in a VA-Paid for that month. Non-VA Special residential Care (e.g., psychiatric or alcohol rehabilitation programs) <i>Not for use on PCE. Only for use on ECS.</i> |
| 655 | N/A | COMMUNITY NON-VA CARE | Pilot Hawaii program only in FY 2002. This stopcode is to be <u>used only in Event Capture System (ECS) – Never Patient Care Encounter (PCE).</u> |
| 656 | N/A | DOD NON-VA CARE | Pilot Hawaii program only in FY 2002. This stopcode is to be <u>used only in ECS – Never in PCE.</u> |
| 657 | N/A | ASSIST LIVING VENDOR WORK | Records (bedday) workload for Department of Veterans Affairs (VA)-Paid Assisted Living Facilities (Use only for V20 Pilot in FY 2002. <u>Never in PCE.</u>) |
| 660 | | CHIROPRACTIC CARE OUTSIDE VA | Consultation, evaluation, follow-up and/or treatment by a licensed doctor of chiropractic for chiropractic spinal manipulative therapy for musculoskeleton problems of the spine, as specified in VHA policy. Care is not delivered within a VA medical center. Includes clinical services and administrative services. NOTE: <i>For chiropractic care delivered within a VA medical center, see Stop Code 436.</i> |
| 670 | N/A | ASSIST LIVING VHA-PAID, STAFF | Veterans Health Administration (VHA) staff coordinating and providing evaluation for patients in VHA-paid Assisted Living facilities. (Mainly V20 pilot in FY 2002.) |

b. **Definition Changes.** Definition changes have occurred in the following primary stop codes: 509; 510; 531; 557; 558; 563; 574 (see Att. J, Table F).

c. **Inactive Codes.** None.

2. Distinctions between Care in the Mental Health Day Hospital and in the Mental Health Day Treatment Center

a. VA has two programs intended to provide special support to mental health patients to avoid hospitalization.

(1) **Day Hospital.** Day Hospital is a specific acute episode program that is intended to help prevent repeat hospitalizations due to exacerbating mental illness. If a patient has been stable on the outside, but suddenly becomes hallucinatory and uncontrolled on current medications, that patient may be referred to the Day Hospital. It is meant to be used to prevent hospitalization in acute crisis or exacerbations only. Usually patients are not assigned to Mental Health Day Hospital for more than 3-week episodes.

July 5, 2002

(2) **Day Treatment.** Day Treatment is chronic Mental Health caregiving for outpatients. This is intended to be used for long-term conditions needing support to maintain care or well-being on the outpatient side only.

b. In FY 1999, the hours and days for the two programs Day Hospital and Day Treatment were changed to match and to more realistically reflect programs 4 to 8 hours per day, 3 to 7 days per week.

(1) Purpose. The major distinction is that Day Treatment is long-term for continuing care and community maintenance. Day Hospital clinics are prioritized for crisis treatment, transitional care and rehabilitation.

(2) Duration. Duration of episode of treatment typically on average, do not extend beyond 3 to 4 weeks per client per acute episode in a Day Hospital Clinic, unlike Day Treatment care which is expected to go on for months or years.

3. Sexual Trauma Counseling

a. **Stop Code 524 – ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 524 is to be used when providing counseling to any veteran who received this type of trauma while on active military duty. These patients may or may not have had sexual trauma as children or before and/or after active duty. If any sexual trauma occurred during active military duty, this DSS Identifier (524) should be used.

b. **Stop Code 589 – NON-ACTIVE DUTY SEX TRAUMA COUNSELING.** Stop Code 589 should be used for patients who have received sexual trauma at some time, but not during active military duty. If it occurred during active military duty, stop code 524 must be used (see Public Law (Pub. L.) 102-585).

4. Categorization of all Mental Health and Domiciliary (DOM) Stop Codes

a. Psychiatry (medical physician (MD))

509 Psychiatry MD (Individual)

512 Psychiatry Consultation

557 Psychiatry MD (Group)

b. Mental Health

502 Mental Health Clinic (Individual)

550 Mental Health Clinic (Group)

533 Mental Health Intervention Biomed Care (Individual)

535 Mental Health Vocational Assistance (Individual)

565 Mental Health Medical Care Only (Group)

566 Mental Health Risk-Factor-Reduction Education (Group)

573 Mental Health Incentive Therapy (Group)

574 Mental Health Compensated Work Therapy (CWT) (Group)

VHA DIRECTIVE 2002-041

July 5, 2002

575 Mental Health Vocational Assistance (Group)

c. Psychology

510 Psychology (Individual)

510473 Neuropsychology Lab

510474 Psychology Research

510509 Psychology – Psychiatry (PSO-PSI)

558 Psychology (Group)

d. Special Programs

529 Health Care for Homeless Veterans (HCHV)/Homeless Mentally Ill (HMI)

522 Department of Housing and Urban Development (HUD) – VA Shared Housing (VASH)

523 Opioid Substitute

540 Post Traumatic Stress Disorder (PTSD) PTSD Clinical Team (PCT)–PTSD (Individual)

561 PCT-PTSD (Group)

577 Psychogeriatric Clinic (Group)

576 Psychogeriatric Clinic (Individual)

559 Psychosocial Rehabilitation (Group)

532 Psychosocial Rehabilitation (Individual)

516 PTSD (Group)

562 PTSD (Individual)

516-726 PTSD DOM Aftercare (Group)

524 Active Duty Sexual Trauma

560 Substance Abuse (Group)

513 Substance Abuse (Individual)

513461 Substance Abuse: Alcohol Dependence (Individual)

513469 Substance Abuse: Drug Dependence (Individual)

560461 Substance Abuse: Alcohol Dependence (Group)

560469 Substance Abuse: Drug Dependence (Group)

519 Substance Use Disorder/PTSD Teams

525 Women's Stress Disorder Treatment Teams

589 Non-Active Duty Sexual Trauma

533707 Smoking Cessation (Individual)

566707 Smoking Cessation (Group)

532713 Gambling Addiction (Individual)

559713 Gambling Addiction (Group)

e. Telephone

527 Telephone General Psychiatry

527564 Telephone Intensive Community Case Management (ICCM)

528 Telephone HMI

530 Telephone HUD-VASH

536 Telephone Mental Health Vocational

537 Telephone Psychosocial Rehabilitation

542 Telephone PTSD
545 Telephone Substance Abuse
545461 Telephone Substance Abuse Treatment-Alcohol Dependence
545469 Telephone Substance Abuse Treatment-Drug Dependence
546 Telephone-Mental Health Intensive Case Management (MHICM)
579 Telephone Psychogeriatrics

f. Off Station

503 Mental Health Residential Care (Individual)
514 Substance Abuse Home Visit
520 Long-term Enhancement
521 Long-term Enhancement (Group)
552 Intensive Psychiatric Community Care (IPCC) Community Visit
564 ICCM
590 Community Outreach to Homeless Vets by Staff other than HCHV and Domiciliary Care for Homeless Veterans (DCHV) programs

g. Day Programs

505 Day Treatment (Individual)
506 Day Hospital (Individual)
547 Intensive Substance Abuse Treatment
547461 Intensive Substance Abuse Treatment-Alcohol Dependence
547469 Intensive Substance Abuse Treatment-Drug Dependence
553 Day Treatment (Group)
554 Day Hospital (Group)
578 Psychogeriatric Day Program
580 PTSD Day Hospital
581 PTSD Day Treatment

h. Primary Care

531 Mental Health Primary Care Team (Individual)
563 Mental Health Primary Care Team (Group)

i. Other

655 Community Non-VA Care
656 Department of Defense (DOD) Non-VA Care
657 Assist Living Vendor Work
670 Info Assists Technology
713 Gambling Addiction
725 DOM Outreach
726 DOM Aftercare Community
727 DOM Aftercare VA
728 DOM Admission Screening Services

VHA DIRECTIVE 2002-041

July 5, 2002

729 Telephone Domiciliary

730 Domiciliary-General Care

731 Psychiatric Residential Rehabilitation Treatment Program (PRRTP)-General Care

j. Mental Health Stops Not Requiring GAF

533 Mental Health Medical Care Only (Individual)

565 Mental Health Medical Care Only (Group)

566 Mental Health Risk-Factor-Reduction Education

573 Mental Health, Incentive Therapy (Group)

574 Mental Health CWT – (Group)

533707 Smoking Cessation (Individual)

566707 Smoking Cessation (Group)

ATTACHMENT J

COMPLETE SUMMARY OF OCTOBER 1, 2001, ACTIVE STOP CODES

a. The complete changes and updates and current status of October 1, 2001, Decision Support System (DSS) Identifiers, their short and long definitions, follows in **Table F**.

b. The following symbols are used throughout Table F:

* Not applicable to Cost Distribution Report (CDR), Automated Medical Information System (AMIS) segment J-19 is used by CDR currently for workload

** Amended use of a DSS Identifier

+ Changed DSS Identifier description

++ New DSS Identifier

‡ Added or changed DSS Identifier Cost Distribution Report account

- Inactivated DSS ID

ψ Work from these stop codes is always Non-billable in Medical Care Cost Fund (MCCF)

TABLE F, Fiscal Year (FY) 2002 Outpatient DSS Identifier Definitions (Effective on Veterans Health Information Systems Technology Architecture (VistA) Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|-------------------|----------------|-------------|-------------------------|--|
| 102 | | 2111.00 | ADMITTING/ SCREENING | Includes all clinical activities involved in the evaluation, screening and treatment of patients in an emergency, urgent care, triage, stretcher room. Also includes activities involved in the admitting and/or screening process of patients applying for medical care. Includes administrative, physician, nursing, and technician services. To be used in first (stop code) position in profile setup. |
| | 102101++ | 2111.00 | EMERGENCY UNIT | Includes all activities involved in the evaluation and screening of patients in an emergency and/or stretcher room. This includes administrative, physician, nursing, and ancillary services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|-------------------|----------------|-------------|--|--|
| 103 ^ψ | | 2780.00 | TELEPHONE TRIAGE | Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of Title 38 United States Code (U.S.C.) Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of Department of Veterans Affairs (VA) patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with human immunodeficiency virus (HIV), or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| | 103801++ | 2780.00 | IN-VISN PHONE TRIAGE – NOT VA MEDICAL CENTER | Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This Triage care is provided by an In-Veterans Integrated Service Network (VISN) Phone Triage, not by the VA medical center itself. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|---------------------------------|---|
| | 103802++ | 2780.00 | OUT OF VISN, VA PHONE TRIAGE | Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This Triage care is provided by an Out-of-VISN Phone Triage, not by the VA medical center itself. |
| | 103803++ | 2780.00 | COMMERCIAL PHONE TRIAGE | Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and professional staff assigned to the admission and/or emergency services area. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. This VA medical center, Health Administration Service (HAS)-recorded Triage care is provided by a contracted Commercial Phone Triage professional staff. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|--------------------------|---|
| 104 | | 2612.00 | PULMONARY FUNCTION | Records patient visit for the performance of a diagnostic pulmonary function study and/or treatment. Includes the services of a therapist and/or a technician, physician services and interpretation, and administrative services. |
| 105 | | 2612.00 | X-RAY | Records patient visit for the performance of diagnostic, routine radiograms; e.g., chest, ankle, spine, tibia, elbow, etc. Includes technician services, physician services and interpretation, and administrative services. |
| 106 | | 2612.00 | EEG | Records patient visit for the performance of an electroencephalogram (EEG). Includes technician services, physician services and interpretation, and administrative services. |
| 107 | | 2612.00 | EKG | Records patient visit for the performance of an electrocardiogram (EKG). Includes technician services, physician services and interpretation, and administrative services. |
| | 107473 | | ECHOCARDIOGRAM (ECHO) | Indicates patient visits for the performance of an ECHO cardiac study. Includes technician services, physician services and interpretation, and administrative services. |
| 108 | | 2612.00 | LABORATORY | Records patient visit for the performance of diagnostic testing; e.g., blood serum, urine, sputum, tissue, etc. Includes technologist services, physician services and interpretation, and administrative services. Includes chemistry, cytology, microbiology, pathology, etc. |
| 109 | | 2612.00 | NUCLEAR MEDICINE | Records patient visit for the performance of nuclear diagnostic procedures. Procedures include bone scan, liver scan, thyroid scan, brain scan, etc. Includes technician services, physician services and interpretation, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|-------------------------------------|---|
| 115 | | 2612.00 | ULTRASOUND | Records patient visit for the performance of ultrasonic diagnostic procedures (sonograms). Includes technician services, services and interpretation, and administrative services. |
| 116 | | 2110.00 | RESPIRATORY THERAPY | Records patient visit for Respiratory Therapy services, including treatment and/or education in use of treatment modalities. (Use code 312 for other pulmonary care.) |
| 117 | | 2610.00 | NURSING | Includes assessment, evaluation, education, treatment services provided by Registered Nurse (RN) or Advanced Nurse Practitioner (ANP) in Nurse Administered clinics. Can be used as first (stop code) or secondary (credit stop) position in clinic setup. Should be second stop code in all Nurse-run work units for team work such as Primary Care (323) and Mental Health (502). |
| | 117473 | | PPD CLINIC | Tuberculosis Purified Protein Derivative (PPD) Shot Clinic |
| | 117710 | | FLUSHOT | Flu Shot Clinic |
| 118 | | N/A* | HOME TREATMENT SERVICES | Records individual visit by VA personnel to the home of a patient for providing care and/or service. Use only when a more definitive stop code is not available. |
| 119 | | N/A* | COMMUNITY NURSING HOME FOLLOW-UP | Records individual visit by VA personnel to patients residing in a community nursing home. |
| 120 | | 2610.00 | HEALTH SCREENING | Records patient medical evaluation and/or screening performed at a location other than a VA medical facility. |
| 121 | | N/A* | RESIDENTIAL CARE (NON-MH) | Records visit by VA personnel to a patient at a residential home care. (Visits of patients in the residential home care program to a VA medical facility are to be recorded to the designated specialty clinic stop.) (If residential care is related to Mental Health (MH), use 503.) |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|-------------------------------------|--|
| 122 | | 2610.00 | PUBLIC HEALTH NURSING | Records individual patient visit with a licensed R.N. that assess, treats, and/or evaluates the patient in the home due to physical limitations preventing travel of veteran to a VA facility. |
| 123 | | 2610.00 | NUTRITION/ DIETETICS/ INDIVIDUAL | Records patient encounter for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to an individual patient. |
| 124 | | 2610.00 | NUTRITION/ DIETETICS/ GROUP | Records the encounter of a group of patients for the purpose of receiving education, information, and/or counseling concerning nutrition and/or dietary matters (including weight control). Use when services are provided to more than one patient in the same session. |
| 125 | | 2610.00 | SOCIAL WORK SERVICE | Records individual patient visit with a social worker when the visit is not accomplished as a portion of another specialty clinic. |
| 126 | | 2612.00 | EVOKED POTENTIAL | An activity that involves the measurement of specific brain electrical responses to discrete sensory stimuli. The evoking stimulus can be visual-evoked potential (VEP), auditory-evoked potential (AEP), or stimulus can be VEP somatosensory-evoked potential (SSEP). Includes physician services, nursing services, technician services, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|---|--|
| 127 | | 2612.00 | TOPOGRAPHICAL BRAIN MAPPING | Records visits of patients receiving a technician services, and computerized EEG and brain imaging technique which results in graphic presentation of the data in two-dimensional, color-coded maps of brain electrical activity. Includes physician services, nursing services, technician services, and administrative services. |
| 128 | | 2612.00 | PROLONGED VIDEO-EEG MONITORING | Records visits of patients who receive EEG while at the same time being video recorded. Includes physician services, nursing services, technician services, and administrative services. |
| 144 | | 2612.00 | RADIONUCLIDE THERAPY | Records patient visit or therapy with unsealed radioactive isotopes and/or radionuclides. Includes technician, physician services and interpretation, safety and administrative services. |
| 145 | | 2612.00 | PHARMACOLOGY/ PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES | Records patient visit for nuclear cardiac perfusion studies. Includes EKG technician, physician services and interpretation and administrative services. |
| 146 | | 2612.00 | Positron Emission Tomography (PET) | Records patient visit for all activities where a cyclotron or generator is employed for the creation of physiologic and/or biochemical premised diagnostic images. Includes the generation of the appropriate radionuclide. Includes technician, physician, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|-----------------|--|---|
| 147 ^W | | 2780.00 | TELEPHONE ANCILLARY | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or profession staff assigned to: Nursing, Public Health Nursing, Nutrition and/or Dietetics, Social Work Service, or Clinical Pharmacy. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual. |
| | 147209 ^W | | VISUAL IMPAIRMENT SERVICE TEAM (VIST) TELEPHONE | |
| 148 ^W | | 2780.00 | TELEPHONE/ DIAGNOSTIC | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and a clinical or professional staff associated with: pulmonary function, x-ray, EEG, EKG, laboratory, nuclear medicine, ultrasound, evoked potential, topographical brain mapping. Includes administrative services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|-------------------|----------------|-------------|--|--|
| 149 | | 2420.00 | RADIATION THERAPY TREATMENT | Records an individual veteran's visit for radiation therapy treatment. Includes technologist services, physicist services, physician services and/or consults, and administrative services. NOTE: Consider a treatment to be the same as a patient visit. |
| 150 | | 2612.00 | COMPUTERIZED TOMOGRAPHY (CT) | Records a patient visit for the performance of diagnostic CT exam. Includes technologist services, physician services and interpretation, and administrative services. |
| 151 | | 2612.00 | MAGNETIC RESONANCE IMAGING (MRI) | Records a patient visit for the performance of diagnostic MRI exams. Includes technologist services, physician services and interpretation, and administrative services. |
| 152 | | 2612.00 | ANGIOGRAM CATHETERIZATION | Records a patient visit for the performance of diagnostic angiographic exams by <u>Catheterization</u> . Includes technologist services, physician, services and interpretations, nursing, radiologist and/or administrative services. |
| 153 | | 2612.00 | INTERVENTIONAL RADIOGRAPHY | Records a patient visit in Radiology for the performance of an interventional radiological procedure. Includes all technologist services, physician services and interpretation, and administrative services. |
| 154++ | | 2612.00 | MEG | Records a patient visit for the performance of diagnostic Magnetoencephalography (MEG) examinations. Includes technologist services, physician's interpretation, technical services, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|--------------------------------------|---|
| 155++ | | 2612.00 | INFORMATION ASSISTS TECHNOLOGY | Records a patient visit for the performance of diagnostic functional and/or structural computerized analysis. This technology, by fusing functional (MEG, Functional Magnetic Resonance Imaging (fMRI), and EEG) information with structural data (MRI, Magnetic Resonance Appraisal (MRA), and/or CT) assists pre-operative evaluation and/or guides intra-operative activity. Includes physician's interpretation, technical services, and administrative services. |
| 160 | | 2610.00 | CLINICAL PHARMACY | Patient visit with a pharmacist for specialized education, instruction, and/or counseling regarding prescribed medications. <u>Do Not Use For Dispensing Medication From Pharmacy.</u> |
| 165 | | 2610.00 | BEREAVEMENT COUNSELING | Records counseling provided to family members and/or friends of deceased patients. (Visits should be reflected as collateral visits). |
| 166+ | | 2610.00 | CHAPLAIN SERVICE - INDIVIDUAL | Records visit for an individual receiving liturgical, sacramental, or worship spiritual care provided by a chaplain. Includes administrative services. |
| 167+ | | 2610.00 | CHAPLAIN SERVICE - GROUP | Records visit for liturgical, sacramental, or worship spiritual care to more than one individual in a group setting by a chaplain. Includes administrative services. |
| 168 | | 2610.00 | CHAPLAIN SERVICE - COLLATERAL | Records consultation, spiritual care, treatment, education, and/or counseling provided by a clinical chaplain to the patient's family members and/or the person(s) with whom the patient has a meaningful relationship. Includes clinical chaplain services and administrative services. |
| 169 ^w | | 2780.00 | TELEPHONE/ CHAPLAIN | Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to chaplain service. Includes clinical, professional, and administrative services. **Provisions of 38 U.S.C. Section 7332 requires the records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID* NUMBER | DSS ID PAIR | CDR ACCT | DSS ID* NAME | DESCRIPTION |
|---------------------------|------------------------|---------------------|---|--|
| 170 | | N/A* | HBPC - PHYSICIAN | Home Based Primary Care (HBPC). Records evaluations; treatment orders and follow-up for patients in HBPC, etc. |
| 171 | | N/A* | HBPC – Registered Nurse (RN)/Registered Nurse Practitioner (RNP)/Physician Assistant (PA) | HBPC. Records initial and continued assessment; teaching patient and caregiver; monitoring patient's condition, supervising Licensed Practical Nurse (LPN)s and Home Health Technician; functioning in expanded nursing role; providing care management and coordination of primary care. |
| 172 | | N/A* | HBPC - NURSE EXTENDER | HBPC. Records monitoring observation of physical, nutritional and psychological status; reinforcing rehabilitation measures; demonstrating and teaching use of therapeutic and rehabilitative devices; providing nursing procedures and personal care. |
| 173 | | N/A* | HBPC - SOCIAL WORKER | HBPC. Records initial and continued assessment of patient and caregiver of interpersonal resources, psychosocial functioning, support system; provides psychosocial treatment including individual and family counseling. |
| 174 | | N/A* | HBPC - THERAPIST | HBPC. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function. |
| | 174202 ^ψ | N/A | HBHC – RECREATION THERAPY (RT) | HBPC. Recreation Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC RT professional. |
| | 174205 ^ψ | N/A | HBPC PHYSICAL THERAPY (PT) | HBPC. Physical Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC PT professional. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|---------------------|-----------------|--|--|
| | 174206 ^ψ | N/A | HBPC OCCUPATIONAL THERAPY (OT) | HBPC. Occupational Therapy. Records assessment of functional status, evaluates home environment for safety and accessibility; teaches and monitors the safe use of prosthetic equipment; teaches body mechanics to minimize risk of injury; establish therapeutic program to maintain function by an HBPC OT professional. |
| 175 | | N/A* | HBPC - DIETITIAN | HBPC. Records assessment of patient's nutritional status, assess adequacy of caregiver's capacity to prepare recommended meals; training of caregiver in efficient ways of managing identified nutritional problems. |
| 176 | | N/A* | HBPC - CLINICAL PHARMACIST | HBPC. Records assessment and monitoring of drug therapy; identifies patient - specific medication issues; educates patient and caregiver about proper use of medications. |
| 177 | | N/A* | HBPC - OTHER | HBPC. Records professional, home health aide and other services provided. |
| | 177201 | | HBPC-Physical Medicine and Rehabilitation Service (PM&RS) | HBPC. Records professional PM&RS and other services provided. |
| | 177210 | | HBPC-Spinal Cord Injury (SCI) | HBPC. Records professional SCI clinical services provided. |
| 178 ^ψ | | 2780.00 | HBPC/ TELEPHONE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical or professional staff assigned to HBPC service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|--------------------------------|--|
| 179 ^ψ | | N/A | TELE-HOME CARE TECHNOLOGY UNIT | Records visits by VA employees using tele-visual means to patients in their homes to evaluate and/or treat wound, ulcerated areas, exercise, patient appearance, advise on patient administered treatment, review pills, etc. The encounter is recorded electronically on progress notes. Applies to those VA medical centers which have made a capital investment in Tele-Home Care Technology. NOTE: For Telemedicine, use credit pair 690. |
| 180 | | 2710.00 | DENTAL | Records outpatient visit of patient for treatment and/or examination relating to dental conditions and accomplished by a dentist and/or dental technician. Includes technician services, dentist services, and administrative services. |
| 181 ^ψ | | 2780.00 | TELEPHONE/DENTAL | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the persons(s) with whom the patient has a meaningful relationship and clinical or professional staff assigned to Dental Service. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 190 | | 2510.00 | ADULT DAY HEALTH CARE | Records visits of patients to an approved VA program. Purpose of visit is to provide care and/or treatment during day hours only, patient returns home each evening. |
| 201 | | 2611.00 | PM&RS | Records patient outpatient visit to PM&RS for consultation and/or evaluation. Includes physician services, technician services, and administrative services. |
| 202 | | 2611.00 | RECREATION THERAPY SERVICE | Records patient visit for consultation and/or /evaluation concerning potential benefits of recreational therapy and/or actual participation by an outpatient in a structured, supervised recreational activity. Includes therapist services and administrative services. |
| 203 | | 2611.00 | AUDIOLOGY | Records outpatient visit for the purpose of consultation and/or evaluation of patients with hearing impairment. Includes audiologist services, technician services, and administrative services. |
| 204 | | 2611.00 | SPEECH PATHOLOGY | Records outpatient visit for the purpose of consultation, evaluation, and/or treatment of patients with speech impediments. Includes pathologist services, therapist and/or technician services, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|---------------------|-----------------|--------------------------------------|---|
| 205 | | 2611.00 | PHYSICAL THERAPY | Records outpatient visit for the purpose of receiving treatment from a physical therapist. Includes the therapist services and Administrative services. |
| 206 | | 2611.00 | OCCUPATIONAL THERAPY | Records outpatient visit for the purpose of receiving treatment from a occupational therapist. Includes the therapist services and administrative services. |
| 207 | | 2611.00 | PM&RS INCENTIVE THERAPY | Records patient visit for evaluation for, or work activity, in the PM&RS Incentive Therapy Program. The rehabilitation program provided under 38 U.S.C. 1718(a) which authorizes assignment of patients to various in house work situations. Pay scale is up to one half of minimum wage. This program is supported by medical care funds. |
| 208 | | 2611.00 | PM&RS COMPENSATED WORK THERAPY (CWT) | Records patient visit for evaluation for, or work activity, in the Physical Medicine and Rehabilitation CWT Program. Involves work subcontracted from and paid for by public or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Fund (STRAF) account at the VA facility. |
| | 208466 ^ψ | | Domiciliary (DOM) CWT | |
| 209 | | 2611.00 | VIST COORDINATOR | Records outpatient visit to the VIST Coordinator to furnish care to the visually impaired veteran. Includes coordinator services and administrative services. In the absence of a VIST Coordinator and when the VIST Coordinators are Performed by another caregiver as collateral duties, i.e., Social Worker; it is appropriate to use the 209 in the primary position and 125 in the credit stop position VIST Telephone visits should be used as indicated: |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|---------------------|----------|-----------------------------|--|
| | 209125 | | | VIST Coordinator duties performed by Social Worker |
| 210 | | 2611.00 | SPINAL CORD INJURY (SCI) | Records patient outpatient visit for evaluation and/or follow-up of a SCI condition or disease. Includes physician services, technician services, and administrative services. |
| | 210414 | | SCI-CYSTOURO | |
| | 210468 | | SCI-RN PROCEDURE | |
| 211 | | 2611.00 | AMPUTATION FOLLOW-UP CLINIC | Records outpatient visit for evaluation and/or treatment following removal of a limb or other appendage. Includes physician services, nursing services, and administrative services. |
| 212 | | 2611.00 | Electromyogram (EMG) | Records visit for the performance of a diagnostic EMG. (Records the electrical activity evoked in a muscle by nerve stimulation.) Includes technician services, physician interpretation, and administrative services. |
| 213 | | 2611.00 | PM&RS VOCATIONAL ASSISTANCE | Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the PM&RS Vocational Rehabilitation Therapy staff. This is to include educational therapy and any other rehabilitation medicine vocational rehabilitation therapy not specifically described as PM&RS CWT. |
| | 213466 ^ψ | | VETS ED/TRNG DOM | |
| 214 | | 2611.00 | KINESIOTHERAPY (KT) | Records patient visit for therapy to improve and/or adjust a condition. Includes therapist, physician and administrative services. |
| 215 | | 5112.00 | SCI HOME CARE PROGRAM | Records visits by VA staff to a patient's home for evaluation and/or follow-up of a SCI condition or disease. Includes physician, nursing, social work, dietetics, rehabilitation, technician, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|--|---|
| 216 ^ψ | | 2780.00 | TELEPHONE/ REHABILITATION (REHAB) & SUPPORT | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship and clinical and professional staff assigned to rehabilitation and support services. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| | 216203 ^ψ | | TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT | |
| | 216204 ^ψ | | TELEPHONE SPEECH REHAB SUPPORT | |
| | 216210 ^ψ | | SCI TELEPHONE SUPPORT | |
| 217 | | 2611.00 | Blind Rehab Outpatient Specialist (BROS) | Records outpatient visit to a Blind Rehabilitation Specialist (BROS) with multiple training), with blinded veterans either in their home environment or in the VA medical center outpatient area for pre- or post- Blind Rehabilitation Center or for training vets unable to participate in inpatient programs. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|---------------------------|---|
| 218+ | | 2611.00 | CAT BLIND REHAB | Computer Assisted Training (CAT) provides specialized services to eligible blinded veterans through comprehensive adaptive computer needs assessment, prescription, training, and issuance of equipment. Normally, veterans receive computer training in a Blind Rehabilitation Center; however, for those veterans who for various reasons are not able to attend the inpatient training program, this training is provided in their home environment. |
| 290 | | 2110.00 | OBSERVATION MEDICINE | Records outpatient visit for Observation provided by a physician assigned to general medical service. Must use the Centers for Medicare and Medicaid Services (CMS), or Current Procedural Terminology (CPT) code definition of Observation. Not to be used for assigning a patient to a bed for Medicine Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services. |
| 291 | | 2210.00 | OBSERVATION SURGERY | Records outpatient visit for Observation provided by a physician assigned to surgery service. Must use CMS, Medicare, or CPT code definition of Observation. Not to be used for assigning a patient to a bed for Surgery Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services. |
| 292 | | 2311.00 | OBSERVATION PSYCHIATRY | Records outpatient visit for Observation provided by a physician assigned to psychiatry service. Includes physician service, ancillary staff and administrative services. |
| 293 | | 2110.00 | OBSERVATION NEUROLOGY | Records outpatient visit for Observation provided by a physician assigned to neurology service. Must use CMS, Medicare, or CPT code definition of Observation. Not to be used for assigning a patient to a bed for Neurology Service Ambulatory Procedures. Includes physician service, ancillary staff and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------------------|---------------------|-------------------------------|---|
| 294 | | 2611.00 | OBSERVATION BLIND REHAB | Records outpatient visit specifically for Observation Care by a Blind Rehabilitation Specialist. |
| 295 | | 2611.00 | OBSERVATION SPINAL CORD | Records outpatient visit for Observation provided by a physician assigned to a spinal cord service. Includes physician service, ancillary staff and administrative services. |
| 296 | | 2611.00 | OBSERVATION REHABILITATION | Records outpatient visit for Observation provided by a physician assigned to rehabilitation service. Includes physician service, ancillary staff and administrative services. |
| 301 | | 2110.00 | GENERAL INTERNAL MEDICINE | Records outpatient visit for evaluation, consultation, and/or follow-up or treatment provided by a physician assigned to general medicine service. Includes physician services, ancillary staff services and administrative services. |
| 302 | | 2110.00 | ALLERGY IMMUNOLOGY | Records visit for consultation, evaluation, and/or follow-up or treatment provided by a physician trained in medical sub-specialty of allergy immunology. Includes physician services, ancillary staff services, and administrative services. |
| 303 | | 2110.00 | CARDIOLOGY | Records visit for consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diagnosis and treatment of heart disease. Includes physician services, ancillary staff services and administrative services. |
| | 303201 | | CARD REHAB | |
| | 303329 – Inactivated 10/1/98 | | CARDIAC CATH | For outpatient Cardiac Catheterization in a non-operating room (OR) setting. |
| 304 | | 2110.00 | DERMATOLOGY | Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in skin disease. Includes physician services, ancillary staff services and administrative services. |
| | 304416 | | DERM PHOTO RX | |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|---------------------------------|---|
| 305 | | 2110.00 | ENDO/METAB (EXCEPT DIABETES) | Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in endocrinology or metabology. Includes physician services, ancillary staff services and administrative services. |
| 306 | | 2110.00 | DIABETES | Records consultation, evaluation, follow-up, treatment provided for diabetes mellitus. Includes physician services, ancillary staff services, and administrative services. |
| | 306117 | | DIAB DM ED | |
| 307 | | 2110.00 | GASTRO- ENTEROLOGY | Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and conditions of the gastrointestinal tract. Includes physician services, ancillary staff services and administrative services. |
| | 307117 | | ENTEROSTOMAL CLINIC | |
| | 307454 | | LIVER | |
| 308 | | 2110.00 | HEMATOLOGY | Records consultation, evaluation, follow-up, treatment provided by physician trained in blood related conditions. Includes physician services, ancillary staff services and administrative services. |
| 309 | | 2110.00 | HYPERTENSION | Records consultation, evaluation, follow-up, treatment of high blood pressure. Includes physician services, ancillary staff services and administrative services. |
| 310 | | 2110.00 | INFECTIOUS DISEASE | Records consultation, evaluation, follow-up, treatment by physician trained in infectious disease. Includes physician services, ancillary staff services and administrative services. |
| 311 | | 2110.00 | PACEMAKER | Records consultation, treatment, evaluation, follow-up for cardiac conditions which benefit from implant stimulation. |
| 312 | | 2110.00 | PULMONARY/CHEST | Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases of the lungs and respiratory tract. Includes physician services, ancillary staff services and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|---|--|
| 313 | | 2110.00 | RENAL/NEPHROL (EXCEPT DIALYSIS) | Records consultation, evaluation, follow-up, and/or treatment provided by physician trained in diseases of the kidney. Includes physician services, ancillary staff services and administrative services. |
| | 313457 | | TRANSPLANT | |
| 314 | | 2110.00 | RHEUMATOLOGY/ ARTHRITIS | Records consultation, evaluation, follow-up, treatment provided by a physician trained in diseases joint and connective tissue (muscle and joints). Includes the physician services, ancillary staff services and administrative services. |
| 315 | | 2110.00 | NEUROLOGY | Records consultation, evaluation, follow-up provided by a physician trained in the treatment of disorders of the nervous system. Includes the physician services and administrative services. |
| | 315456 | | EPILEPSY | |
| | 315469 | | MOVEMENT DISORDER | |
| | 315470 | | SLEEP DISORDER | |
| 316 | | 2110.00 | ONCOLOGY/TUMOR | Records consultation, evaluation, follow-up, and/or treatment provided by a physician knowledgeable in the treatment of tumors and malignancies. Includes physician services, ancillary staff services and administrative services. |
| | 316149 | | RAD RX (WITH ONCOLOGY MEDICINE SERVICE) | |
| 317 | | 2110.00 | COUMADIN CLINIC | Records evaluation, follow-up, treatment provided to veterans receiving coumadin. Includes physician services, nursing services, pharmacy and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|---|--|
| 318 | | 2110.00 | GERIATRIC CLINIC | Consultation, evaluation, follow-up and/or treatment provided by a physician trained in clinical problems associated with aging. Includes physician services and administrative services. This clinic includes specialty (i.e., Falls Clinic, etc.) services for elderly patients but does not function as a GEM clinic. |
| 319 | | 2110.00 | GERIATRIC EVALUATION AND MANAGEMENT (GEM) CLINIC | Records patient visit for comprehensive, multi-dimensional evaluation, management and follow-up treatment of selected elderly patients provided by an interdisciplinary team, including physician, nurse and social worker at a minimum, who are trained in assessment and management of the functional, medical and psychosocial problems of the elderly. The GEM clinic provides follow-up of patients discharged from the GEM unit (if available at facility) as well as admits new patients for outpatient evaluation of frail elderly patients. Includes physician, nurse, social work and administrative services. |
| 320 | | 2110.00 | ALZHEIMER'S/ DEMENTIA CLINIC | Records patient visit for evaluation, management, and follow-up treatment of patients with Alzheimer's Disease (AD) or related dementias provided by physician and other appropriate health team members trained in the diagnostic aspects of AD and other dementias and the special care needs of the patient and family caregivers. Includes physician, nurse, social work, psychology and administrative services. |
| 321 | | 2110.00 | Gastrointestinal (GI) ENDOSCOPY | Records patient visit for performance or examination of part(s) of the gastroenterologic tract and related structures using special instruments by physician or consultants. Examinations may include but not be limited to esophagoscopy, gastroscopy, duodenoscopy, colonoscopy and sigmoidoscopy. Includes physician, nurse, technician and administrative services. DSS Identifier 321 used in the primary position is sufficient if endoscopy procedure is done in the outpatient endoscopy suite. It may also be used as a credit pair if endoscopy is not done in the endoscopy suite. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|--|--|
| 322 | | 2110.00 | WOMEN'S CLINIC | Records patient visit to a formal, regularly scheduled women's clinic which provides gender specific and preventive services as well as counseling to women. Includes nurse, nurse practitioner, physician and clinicians providing counseling. (Staff may include gynecologist or facility may have a separate gynecology clinic or refer gynecology to outside practitioners). |
| 323 | | 2130.00 | PRIMARY CARE/ MEDICINE | Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients on their team. |
| | 323691++ | 2130.00 | PRE-EMPLOY PHYSICAL MILITARY PERSONNEL | Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients, as required. This credit pair is specifically for special pre-employment physicals for Peace Corps and active duty military personnel. NOTE: 691 may be used as a credit pair with other primary stops, such as: 102 and 301, as required. |
| 324 ^W | | 2780.00 | TELEPHONE/ MEDICINE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical/professional staff assigned to the medicine service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|--|--|
| 325 ^ψ | | 2780.00 | TELEPHONE/ NEUROLOGY | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to Neurology. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 326 ^ψ | | 2780.00 | TELEPHONE/ GERIATRICS | Records patient consultation or medical case management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical or professional staff assigned to the Geriatrics Service. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 327 | | 2211.00 | MED MD PERFORM INVASIVE OR PROC | Records the same day operating room preparation, services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with 327 in the primary position; the medical code related to the medical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center elects to do so. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|---|---|
| 328 | | 2110.00 | MEDICAL/ SURGICAL DAY UNIT (MSDU) | Staffed by nurses paid by Medical, Surgical or Nursing Service to support outpatient medical or surgical patients receiving intensive care or post-op Day Unit care. Some outpatient surgery patients use the recovery room only. If so, stop code 429 includes the services. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296; reference Observation Care, Att. F, par. 5). |
| 329 | | 2110.00 | MEDICAL PROCEDURE UNIT | Records invasive medical procedures done in a non-operating room setting. Use only when a more definitive code is not available (321-Endoscopy, 330-Chemotherapy, 333-Cardiac Catheterization, 334-Exercise Tolerance Test (ETT)). Do not use if procedure is done in Operating Room (327). Includes physician and other ancillary staff's time. If procedures are done in a unit or suite, DSS Identifier 329 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document non-OR invasive medical procedures done in other areas. For example: |
| | 304329 | | | Dermatology Biopsies |
| | 307329 | | | Liver Biopsies |
| | 116329 | | | Respiratory Therapy procedures |
| | 316329 | | | Oncology and/or tumor procedures |
| 330 | | 2420.00 | CHEMOTHERAPY PROCEDURES UNIT MEDICINE | A support unit staffed by nurses, technicians, and/or other for the support of patients undergoing outpatient chemotherapy under the care of a Medical Service physician. |
| 331 | | 2110.00 | PRE-BED CARE MD (MEDICAL SERVICE) | Medical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296). |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|--|--|
| 332 | | 2110.00 | PRE-BED CARE RN (MEDICAL SERVICE) | Nurse evaluation and care support of patients intended to be admitted to Medical Service in the hospital in the near future. Medical Service physician oversight. <u>Do Not</u> use for Observation Care (for outpatient Observation, see Stops 290-296). |
| 333 | | 2110.00 | CARDIAC CATHETERIZATION | Records visit for Cardiac Catheterization and related studies in a Cardiac Catheterization Suite or Laboratory Unit. If Cardiac Catheterization is done in a Cardiac Catheterization Suite, DSS Identifier 333 used in the primary position is sufficient. |
| 334 | | 2110 | CARDIAC STRESS TEST/ETT | ETT. Records patient visit for cardiac stress tests (either ETT or drug-induced and other related tests in a cardiac exercise tolerance laboratory, or unit). If ETT is done in a special exercise stress test laboratory, unit, or suite, DSS Identifier 334 used in the primary position is sufficient. The Nuclear Medicine part of Cardiac Stress tests (ETT) should be recorded with stop code 109. 334 schedules and reports the cardiology (Medicine Service) contribution only. |
| 350 | | 2110.00 | GERIATRIC PRIMARY CARE | Records Primary Care provided to Geriatric patients through coordinated, interdisciplinary provision of medical, nursing, psychosocial services, ongoing and preventive health care services, health education to patients and caregivers, referral for specialty, rehabilitation and other levels of care, follow-up and overall care management by primary care provider and support team. |
| 351++ | | 2110.00 | ADVANCED ILLNESS COORDINATED CARE (AICC) | Records AICC for improved care at the end-of-life. Provided to patients through coordinated, interdisciplinary provision of medical, nursing, and psychosocial services. AICC provides education, counseling, advocacy, and care coordination to patients and caregivers. Referral for specialty, or other levels of care, follow-up, and overall care management by the AICC Coordinator in order to improve the individual's quality of life for those who are at the advanced or end stage of illness. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|--------------------|--|
| | 370++ | | LTC SCREENING | Records the screening or assessment for consideration of LTC placement for a geriatric patient by a healthcare professional (RN Social Worker (SW), and/or medical physician (MD)). The primary stop would be the clinic providing the Long-term Care (LTC) screening and/or assessment. |
| 401 | | 2210.00 | GENERAL SURGERY | Records consultation, evaluation, follow-up, treatment provided by a physician trained in general surgical diseases and procedures. Includes physician and administrative services. |
| 402 | | 2210.00 | CARDIAC SURGERY | Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the heart. Includes physician services and administrative services. |
| 403 | | 2210.00 | ENT | Ear, nose, and throat (ENT). Records consultation, evaluation, follow-up, and/or treatment provided by a physician trained in diseases and surgical procedures relating to the ear, nose, and throat. Includes physician services and administrative services. |
| 404 | | 2210.00 | GYNECOLOGY | Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures of the female genital tract. Includes physician services and administrative services. |
| 405 | | 2210.00 | HAND SURGERY | Consultation, evaluation, follow-up, provided by a physician trained in surgical hand and bone disorders. Includes physician and/or technician services and administrative services. |
| 406 | | 2210.00 | NEUROSURGERY | Consultation, evaluation, follow-up, treatment provided by a physician trained in the diseases and surgical procedures relating to the central and peripheral nervous system. Includes physician services and administrative services. |
| 407 | | 2210.00 | OPHTHALMOLOGY | Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures of the eye. Includes physician services and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|---------------------|--|
| 408 | | 2210.00 | OPTOMETRY | Examination, diagnosis and treatment of the eyes for ocular and vision defects. Physician trained in diseases of the eyes. Includes physician services and administrative services. |
| 409 | | 2210.00 | ORTHOPEDICS | Consultation, evaluation, follow-up, treatment by a physician trained in diseases and surgical procedures relating to the muscular and skeletal system. Includes physician services and administrative services. |
| 410 | | 2210.00 | PLASTIC SURGERY | Consultation, evaluation, follow-up and/or treatment by a physician trained in techniques of reconstructive surgeries. Includes physician services and administrative services. |
| | 410210 | | SCI PLASTIC | |
| 411 | | 2210.00 | PODIATRY | Consultation, evaluation, follow-up, treatment by a physician trained in disorders of the feet. Includes physician services and administrative services. |
| 412 | | 2210.00 | PROCTOLOGY | Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures relating to the rectum. Includes physician services and administrative services. |
| 413 | | 2210.00 | THORACIC SURGERY | Consultation, evaluation, follow-up, treatment provided by a physician trained in surgical procedures relating to the chest. Includes physician services and administrative services. |
| 414 | | 2210.00 | UROLOGY | Consultation, evaluation, follow-up, treatment provided by a physician trained in disorders and surgical procedures relating to the urinary tract, both male and female, and male genital organs. Includes physicians' services and administrative services. |
| | 414451 | | IMPOTENCY | |
| | 414473 | | URODYNAMICS | |
| 415 | | 2210.00 | VASCULAR SURGERY | Consultation, evaluation, follow-up, treatment provided by a physician trained in diseases and surgical procedures of vascular system. Includes physician services and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------------------|---------------------|--|---|
| | 415461 | | ADAM CLINIC | Aneurysm Detection and Management (ADAM) |
| 416 | | 2210.00 | AMBULATORY SURGERY EVALUATION BY NON-MD | Ambulatory Surgery Care: Records the care, testing and/or education in preparing any patient for a future scheduled ambulatory surgical procedure or on the same day as surgery. This includes administrative, nursing and ancillary services. (Pre-op Anesthesia Care is to be included under Code 419). |
| 417 | | 2614.00 | PROSTHETIC, ORTHOTICS | Consultation and/or evaluation, follow-up, and treatment provided by prosthetic, orthotic personnel for the purpose of a measurement, fitting, adjustment, instruction of a prosthetic, orthotic appliance intended to replace, support, substitute for a deformed, weakened, missing anatomical portion of the body. Includes physician services, orthotist, prosthetist services, therapist services and administrative services. |
| | 417201 | | MAJOR MED DEVICES PROSTHETICS | |
| | 417451 | | WHEEL CHAIR | |
| | 417452 | | CUSHION | |
| | 417455 | | SHOE/BRACE | |
| | 417473 - inactivated 10/1/98 | | ORTHOTIC LAB | |
| | 417474 - inactivated 10/1/98 | | PROSTHETIC LAB | |
| 418 | | 2614.00 | AMPUTATION CLINIC | Consultation, evaluation, follow-up, treatment provided following surgical removal of, or loss of, a limb, extremity (all or partial). Includes the physician services, prosthetist services, and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|--|---|
| 419 | | 2210.00 | ANESTHESIA PRE-OP/POST-OP CONSULT | Consultation provided to outpatient in preparation for surgical procedures. Or immediately after an operation. Should not be used for non-operation related work. Includes services of anesthesiologist and administrative services. |
| 420 | | 2210.00 | PAIN CLINIC | Consultation, follow-up, treatment for management of pain. Physician assigned is determined at station level. Includes physician services, other clinicians, and administrative services. |
| 421 | | 2210.00 | VASCULAR LABORATORY | Records patient visit for the performance of diagnostic blood vessel flow procedures (Dopplers, etc.) Includes physician services, interpretation, technician services and administrative services, under the direction of the Chief of Surgery. |
| 422 | | 2210.00 | CAST CLINIC | Records visit for the purpose of application, measurement, adjustment, removal of plaster casts and splints. Clinic is normally staffed by a Orthopedic physician or technician. Includes physician and/or technician services and administrative services. |
| 423+ | | 2614.00 | PROSTHETIC SUPPLY DISPENSED | Records patient visit for consultation, evaluation, education, information, and/or counseling concerning eligibility for prosthetic services, appliances, devices and benefit claims and prescription processing. Includes prosthetic representative and administrative services. Includes dispensing of Prosthetic Supplies to patients, as available. |
| | 423461 | | COMPUTER-AIDED DESIGN (CAD) COMPUTER AIDED MODELING (CAM) UNIT | |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|-----------------------------------|--------------------|-----------------|---|--|
| 424 ^u | | 2780.00 | TELEPHONE/ SURGERY | Records patient consultation or medical care management, advice, and referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the surgical service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 425 ^u | | 2780.00 | TELEPHONE/ PROSTHETICS/ ORTHOTICS | Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to prosthetics or orthotics. Includes administrative and professional services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 426 | | 2210.00 | WOMEN SURGERY | Consultation and/or evaluation follow-up treatment relative to the diseases and surgical procedures of the female gender. Includes clinical and administrative services. |
| 427 - (Inactivated 10/1/97) | | 2230.00 | PRIMARY CARE/ SURGERY | Records patient care provided through a coordinated interdisciplinary approach consisting of: (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity; and (f) patient and non-professional care giver education and training. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|---|--|
| 428 ^u | | 2780.00 | TELEPHONE/ OPTOMETRY | Records patient consultation or medical care management, advice and/or referral provided by telephone contact between patient or patient's next-of-kin and/or person(s) with whom the patient has a meaningful relationship and the clinical and/or professional staff assigned to optometry. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 429 | | 2211.00 | OUTPATIENT CARE IN THE OPERATING ROOM | Records the same day operating room preparation, operating room services, and post-operative recovery room care. All operating room care for outpatients should be designated by a DSS Identifier with stop code 429 in the primary position. This applies to all surgical clinics set up to automatically receive data via the surgery VistA package interface to PCE. The surgical stop code related to the surgical specialty can be used in the secondary DSS Identifier position as a modifier, if the VA medical center selects to do so. |
| 430 | | 2211.00 | CYSTO ROOM UNIT FOR OUTPATIENT | Staffed by Surgical Service paid technician(s) or nurses, and a Surgical Service physician performs the procedure(s), in Cysto Room unit for outpatients. |
| 431 | | 2420.00 | CHEMOTHERAPY PROCEDURES UNIT SURGERY | A support unit staffed by nurses, technicians and/or others for the support of patients undergoing outpatient chemotherapy under the care of a Surgical Service physician. |
| 432 | | 2210.00 | PRE-BED CARE M.D. (SURGICAL SERVICE) | Surgical Service physician evaluation and care of patients intended to be admitted to the hospital in the near future. |
| 433 | | 2210.00 | PRE-BED CARE RN (SURGERY) | Nurse evaluation and care support of patients intended to be admitted to Surgery Service in the hospital in the near future. Surgical Service physician oversight. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|---------------|----------|--|--|
| 435 | | 2210.00 | SURGICAL PROCEDURE UNIT | Records invasive surgical procedures done in a non-operating room setting. Use only when a more definitive code is not available (430- Cysto, 431- Chemotherapy). Do not use if procedure is done in Operating Room (429). Includes physician and other ancillary staff 's time. If procedures are done in a unit or suite, DSS Identifier 435 used in the primary position is sufficient. It is also appropriate to use this code as a credit pair if site wishes to document invasive surgical procedures done in other areas. |
| 436++ | | 2110.00 | CHIROPRACTIC CARE IN MED CTR | Consultation, evaluation, follow-up and/or treatment by a licensed doctor of chiropractic for chiropractic spinal manipulative therapy for musculoskeleton problems of the spine, as specified in VHA policy. Care is delivered within a VA medical center by Fee-basis or VA staff provider. Includes clinical services and administrative services. NOTE: <i>For chiropractic care delivered outside of a VA medical center, see Stop Code 660.</i> |
| | 450 thru 485* | N/A* | *Use as credit pairs only. (See DSS Stop Code Book 1/97 for List A DSS Guides) | May use at discretion of facility without VA Central Office approval. Used only for tracking and counting of workload. They may not be assigned to a cost distribution account and do not impact on outpatient workload visits unless another designated or approved stop code is reported, as primary |
| | 450 | | Compensation and Pension (C&P) EXAMS (available in FY 97) | |
| | 451 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 452 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 453 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 454 | | | SPECIAL REGISTRY 5 |
| | 455 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 456 | | | SPECIAL REGISTRY 6 |
| | 457 | | | TRANSPLANT |
| | 458 | | | SPECIAL REGISTRY 7 |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|-------------|---|
| | 459 | | | SPECIAL REGISTRY 8 |
| | 460 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 461 | | | SPECIAL REGISTRY 1 |
| | 462 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 463 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 464 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 465 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 466 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 467 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 468 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 469 | | | SPECIAL REGISTRY 2 |
| | 470 | | | SPECIAL REGISTRY 3 |
| | 471 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 472 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 473 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 474 | | | RESEARCH |
| | 475 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 476 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 477 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 478 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 479 | | | SPECIAL REGISTRY 4 |
| | 480 | | | COMPREHENSIVE FUNDOSCOPY EXAM - This DSS identifier may only be used in the credit position. It is primarily to be used with identifiers 301, 305, 306, 309, 323, 350, 407 and 408 whenever a comprehensive fundoscopic examination is performed, i.e., for patients with diabetes or hypertension; however, it may be used in conjunction with any other DSS identifier should the need arise. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------------------------|-------------|----------|---|---|
| | 481 | | BRONCHOSCOPY | If Bronchoscopy is done, 481 is to be used as the credit pair for the primary outpatient unit which performs the procedure – (CDR account used is the CDR account for the primary) for example: |
| | 321481 | | | if Outpatient Bronchoscopy is done by Surgery in the OR. |
| | 312481 | | | if Outpatient Bronchoscopy is done in the Pulmonary Area. |
| | 327481 | | | if Outpatient Bronchoscopy is done by Medicine in the OR. |
| | 329481 | | | if Outpatient Bronchoscopy is done in the Medical Procedure Unit. |
| | 435481 | | | if Outpatient Bronchoscopy is done in “Lumps and Bumps” Surgery Procedure Unit |
| | 482 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 483 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 484 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| | 485 | | | SPECIAL DSS CREDIT PAIR - LOCALLY DEFINED |
| 501 - Inactivated 10/1/94 | | N/A* | HOMELESS MENTALLY ILL OUTREACH | Records any visit, relating to the care of a homeless chronically mentally ill (HCMI) patient, made to a community-based non-VA facility. May include physician services, psychology services, social services, nursing services and administrative services. |
| 502 | | 2311.00 | MENTAL HEALTH CLINIC INDIVIDUAL | Individual evaluation, consultation, and/or treatment by clinical staff trained in mental diseases and disorders. Includes clinical services and administrative services. |
| 503 | | N/A* | MENTAL HEALTH RESIDENTIAL CARE INDIVIDUAL | Records visits to a patient residing in: a <u>community</u> nursing home, a boarding home, a community home, etc. Includes physician, nursing, social work, and administrative services. (If not residential care related to Mental Health, use 121) |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|-------------|----------|---|--|
| 504 - Inactivated 4/1/97 | | 5117.00 | INTENSIVE PSYCHIATRIC COMMUNITY CARE (IPCC) MEDICAL CENTER VISIT | Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits of patients and/or their families or caregivers to IPCC staff on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative services provided IPCC patients by IPCC staff. Additional stop codes may not be taken for the same workload. |
| 505 | | 2311.00 | DAY TREATMENT- INDIVIDUAL | Records individual patient visit for ongoing treatment and rehabilitation services, of patients with mental health and psychogeriatric disorders, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services. |
| 506 | | 2311.00 | DAY HOSPITAL - INDIVIDUAL | Records individual patient visits for evaluation, treatment, and/or rehabilitation of patients with mental health disorders, who require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Is typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Day hospital clinics serve patients who are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services. |
| 507 - Inactivated 4/1/97 | | 2316.00 | DRUG DEPENDENCE - INDIVIDUAL | Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services. |
| 508 - Inactivated 4/1/97 | | 2316.00 | ALCOHOL TREATMENT - INDIVIDUAL | Records patient visits for individual evaluation, consultation, follow-up and treatment provided by a facility's formal Alcohol Dependence Treatment Program. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|------------------------------|-----------------|------------------------------|--|
| 509+ | | 2311.00 | PSYCHIATRY – MD INDIVIDUAL | Use when the MD-Psychiatrist’s care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or Post-traumatic Stress Disorder (PTSD) Clinical Team. Records individual patient visits for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional, and behavioral disorders. May prescribe medications. Includes physician and administrative services. |
| 510+ | | 2311.00 | PSYCHOLOGY - INDIVIDUAL | Use when the psychologist’s care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team (PCT). Records individual patient visits for the purpose of evaluation, follow-up, and treatment provided by a psychologist. Includes administrative services. |
| | 510473 – Inactivated 10/1/99 | | NEURO PSYCHOLOGY LAB | Records the individual patient visit for the purpose of neuropsychological assessments performed by a specially trained psychologist in neuropsychological evaluations. Assessments usually are performed in a designated lab setting. |
| | 510474 ^ψ | | PSO RESEARCH | Records the individual patient visit for evaluation, follow-up, and treatment involved in a research protocol under the direction of Psychology Service |
| | 510475 – Inactivated 10/1/98 | | RESEARCH | Use 510-474 |
| | 510509 – Inactivated 10/1/99 | | PSO-PSI | |
| 512 | | 2311.00 | PSYCHIATRY CONSULTATION | Records patient consultation with a physician trained in mental, emotional and behavioral disorders. Includes physician and administrative services. |
| 513 | | 2316.00 | SUBSTANCE ABUSE - INDIVIDUAL | Records patient visits for individual evaluation, consultation, follow-up, and treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT-Transitional Residence (TR) Program. Includes clinical and administrative services. If the program is exclusively for alcohol-dependent clients, use 513-461. If the program is exclusively for drug-dependent clients, use 513-469. If the program is for generic substance abuse (drug and alcohol), use 513 alone - without a secondary DSS Identifier. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|--------------------|-----------------|---|--|
| | 513461 | 2316.00 | INDIVIDUAL SUBSTANCE ABUSE: ALCOHOL DEPENDENCE | Records patient visits for individual evaluation, consultation, follow-up, and/or treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT-TR Program. Includes clinical and administrative services: for clients exclusively with alcohol dependence. |
| | 513469 | 2316.00 | INDIVIDUAL SUBSTANCE ABUSE: DRUG DEPENDENCE | Records patient visits for individual evaluation, consultation, follow-up, and/or treatment provided by a facility's formal Substance Abuse Treatment Program, including the Substance Abuse CWT-TR Program. Includes clinical and administrative services: for clients exclusively with drug dependence. |
| 514 | | 2316.00 | SUBSTANCE ABUSE - HOME VISIT | Records visit by VA staff to patients with history of alcohol and drug abuse. The visit is accomplished in the patient's residence. Includes clinical services and administrative services. |
| 515 - Inactivated 4/1/97 | | 2311.00 | CWT/TR-HCMI | CWT-TR visits by outpatients who are in CWT-TR programs which were funded by HCMI. These visits reflect the CWT work component as well as the independent living skills training and treatment of this comprehensive community re-entry program. |
| 516 | | 2310.00 | PTSD - GROUP | Records consultation and/or treatment follow-up provided to more than one individual. Treatment is provided to those patients with PTSD. Includes clinical services and administrative services. This activity does not take place through a designated PCT. |
| | 516726 | | PTSD DOM- AFTERCARE- GROUP | Records consultation and treatment follow-up to more than one individual with a PTSD. Includes clinical and administrative services provided to discharged DOM patients by Psychiatry staff. This activity does not take place through a designated PCT. |
| 517 - Inactivated 4/1/97 | | 2316.00 | CWT- SUBSTANCE ABUSE | Compensated work therapy visits by outpatients who are in a substance abuse program which have been enhanced to support CWT. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|--------------------|-----------------|---|--|
| 518 - Inactivated 4/1/97 | | 2316.00 | CWT-TR - SUBSTANCE ABUSE | CWT-TR visits by outpatients who are in CWT-TR programs which were funded by substance abuse. These visits reflect the CWT work component as well as the independent living skills training and treatment of the comprehensive community re-entry program. |
| 519 | | 2317.00 | SUBSTANCE USE DISORDER/PTSD TEAMS | <u>Approved VA medical centers only.</u> Records visit to a treatment team designed to treat substance use disorders (drug and alcohol) in conjunction with PTSD. Includes clinical services and administrative services. |
| 520 | | 2311.00 | LONG-TERM ENHANCEMENT - INDIVIDUAL | For use by <u>approved</u> long-term psychiatric care hospitals. Provides Individual outpatient support for maintenance in the community of chronic mentally ill veterans with a history of institutional dependence. |
| 521 | | 2310.00 | LONG-TERM ENHANCEMENT - GROUP | For use by <u>approved</u> long-term psychiatric care hospitals. Provides group outpatient support for chronic mentally ill patients to continue living in the community. |
| 522 | | 2318.00 | DEPARTMENT OF HOUSING AND URBAN RENEWAL- (HUD)-VA SHARED HOUSING (VASH) | Records visits by staff of the HUD-VASH program for homeless veterans and families of these veterans. Workload should reflect activity related to permanent housing as well as caring for formerly homeless veterans in permanent housing. Includes physician services, psychology services, social services, nursing services, rehabilitation services and administrative services. |
| 523 | | 2316.00 | OPIOID SUBSTITUTION | Outpatient treatment of opiate dependent clients by opioid substitution, including methadone maintenance, by the facility's formal substance abuse program. Includes clinical services and administrative services. |
| 524 ^W | | 2311.00 | ACTIVE DUTY SEX TRAUMA | Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment of a sexual nature, while serving on active military duty. Services include clinical and administrative services. (Public Law 102-585) |
| 525 ^W | | 2311.00 | WOMEN'S STRESS DISORDER TREATMENT TEAMS | Records contacts with veterans seen by Women's Stress Disorder Treatment teams at officially VA Central Office-designated VA medical centers. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|---------------------|-----------------|---|---|
| 526 - Inactivated 4/1/97 | | 2780.00 | TELEPHONE/ SPECIAL PSYCHIATRY | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the special psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 527 ^ψ | | 2780.00 | TELEPHONE/ GENERAL PSYCHIATRY | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the general psychiatry service. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| | 527564 ^ψ | | TELEPHONE MH TEAM CASE MANAGEMENT | Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the MH Team Case Management program. Includes administrative and clinical services. <u>NOT</u> to be used for telephone contacts with the New England Program Evaluation Center (NEPEC)-supported Intensive Psychiatric Community Care (IPCC) teams. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released, discussed unless there is written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|---|---|
| 528 ^W | | 2780.00 | TELEPHONE/ HOMELESS MENTALLY ILL | Records patient consultation or medical care management, advice, and/or referral provided by staff funded through the Health Care for Homeless Veterans (HCHV) programs (except for those programs assigned to other specific stop codes, such as the HUD-VASH program) to homeless veterans with mental and or substance abuse disorders, or to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 529 | | 2312.00 | HCHV/HMI | Records any visit provided by clinical staff funded through a HCHV program (except for the programs with specific stop codes, such as the HUD-VASH program) to HCMV veterans with mental and/or substance abuse disorders or family members of such veterans. |
| 530 ^W | | 2780.00 | TELEPHONE/ HUD-VASH | Records patient consultation or medical care management, advice, and/or referral provided by telephone staff of the HUD-VASH program to homeless veterans who are being case-managed in the HUD-VASH program, or who are being screened for placement, and to family members of these veterans. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual. |
| 531+ | | 2331.00 | MENTAL HEALTH PRIMARY CARE TEAM - INDIVIDUAL | Records individual care provided to patients assigned to a Mental Health Primary Care Team, characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non-professional care giver education and training. Includes clinical, ancillary and administrative services, according to VHA policy. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|--|--|
| 532 | | 2315.00 | PSYCHOSOCIAL REHABILITATION INDIVIDUAL | Records individual services provided to aid veteran's successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by Psychosocial Rehabilitation Programs and other programs where more specific DSS Identifiers do not exist.) |
| | 532713++ | 2315.00 | GAMBLING ADDICTION IND | Records individual patient visit with MH professional: physician, psychologist, social worker, or nurse for the purpose of treating gambling addiction. |
| 533++ | | 2311.00 | MH INTERVENTION BIOMED CARE INDIVIDUAL | For use by MH clinicians who provide individual services to patients in clinics other than MH, where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. <u>Such non-psychiatric diagnoses would fail to trigger the Global Assessment Functioning (GAF) expectation.</u> Examples of such interventions for non-psychiatric illness include: chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-MH venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-MH venues, for conditions primarily diagnosable under the Diagnostic and Statistical Manual of Mental Diseases, 4 th Edition (DSM IV), will continue to be placed in the appropriate program-specific stop code with a full multi-axial diagnosis, including GAF. |
| | 533707++ | 2311.00 | SMOKING CESSATION INDIVIDUAL | Records individual patient visit with MH professional: physician, psychologist, social worker, or nurse to assist smoking cessation. No GAF required. |
| 535 | | 2315.00 | MH VOCATIONAL ASSISTANCE INDIVIDUAL | Records individual patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by Vocational Rehabilitation (Vocational Rehabilitation) Therapy programs for veterans with psychosocial rehabilitation needs. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|--|---|
| 536 ^W | | 2780.00 | TELEPHONE/ MH VOCATIONAL ASSISTANCE | Records vocational services provided via telephone for veterans with psychosocial rehabilitation needs. |
| 537 ^W | | 2780.00 | TELEPHONE/ PSYCHOSOCIAL REHABILITATION | Records services provided via telephone to aid veterans' community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist). |
| 538 | | 2311.00 | PSYCHOLOGICAL TESTING | Records the individual patient encounter for psychological and/or neuropsychological assessment, using psychometric instruments or tests interpreted by a psychologist. |
| 540 | | 2313.00 | PCT POST - TRAUMATIC STRESS INDIVIDUAL | Records consultation, evaluation, and/or follow-up provided to a patient with a diagnosis of post traumatic stress syndrome. Treatment is provided by a Specialty Multidisciplinary clinical team. PCT. |
| 542 ^W | | 2780.00 | TELEPHONE/ PTSD | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the PCT. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|------------------------|---------------------|-------------------------------------|--|
| 543 - Inactivated 4/1/97 | | 2316.00 | TELEPHONE/ ALCOHOL DEPENDENCE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the alcohol dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal their identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual. |
| 544 – Inactivated 4/1/97 | | 2316.00 | TELEPHONE/ DRUG DEPENDENCE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the dependence treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual. |
| 545 ^W | | 2780.00 | TELEPHONE/ SUBSTANCE ABUSE | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the substance abuse treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------|------------------------|---------------------|---|--|
| | 545461 ^ψ | 2780.00 | TELEPHONE SUBSTANCE ABUSE TREATMENT - ALCOHOL DEPENDENCE | Use for Alcohol Dependence Treatment Phone Calls. Using the full definition for 545. |
| | 545469 ^ψ | 2780.00 | TELEPHONE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENCE | Use for Drug Dependence Treatment Phone Calls. Using the full definition for 545. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|--|---|
| 546 ^W | | 2780.00 | TELEPHONE/ MHICM | Records patient consultation or psychiatric care, management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical, professional staff assigned to the special MHICM teams (see 552). Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, prognosis, diagnosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual. |
| 547 | | 2316.00 | INTENSIVE SUBSTANCE ABUSE TREATMENT | Records visits for intensive substance abuse services provided by substance abuse treatment program staff. Treatment program is usually an interdisciplinary outpatient program designed for substance abuse clients based upon day hospital, day treatment, psychosocial rehabilitation models (may include outpatient detoxification). Patients generally are expected to participate in a program of 3 or more hours per day, 3 days a week at a minimum. |
| | 547461 | | INTENSIVE SUBSTANCE ABUSE TREATMENT- ALCOHOL DEPENDENCE | Use only for an intensive substance abuse treatment program exclusively treating alcohol-dependent clients. (See the full definition for 547). |
| | 547469 | | INTENSIVE SUBSTANCE ABUSE TREATMENT - DRUG DEPENDENT | Use only for an intensive substance abuse treatment program exclusively treating drug-dependent clients. (See the full definition for 547). |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|-------------|----------|---|--|
| 550 | | 2310.00 | MENTAL HEALTH CLINIC (GROUP) | Records services assigned to a group of outpatients by any clinical specialty assigned to the Mental Health Clinic. |
| 551 - Inactivated 4/1/97 | | 5117.00 | IPCC COMMUNITY CLINIC/ DAY PROGRAM VISIT | Only VA medical centers approved to participate in the IPCC Program may use this code. This records visits with patients and/or their families or caregivers to IPCC staff at identified IPCC satellite clinics, IPCC storefronts or IPCC offices not on the VA medical center grounds or at a VA outpatient clinic. Includes clinical and administrative staff. Additional stop codes may not be taken for the same workload. |
| 552 ^W | | 5117.00 | MENTAL HEALTH INTENSIVE CASE MANAGEMENT (MHICM) | <u>Only VA medical centers approved to participate in MHICM (previously IPCC) programs monitored by NEPEC may use this code.</u> This records visits with patients and/or their families or caregivers by MHICM staff at all locations including VA outpatient or MHICM satellite clinics, MHICM storefronts, MHICM offices, or home visits. Includes clinical and administrative services provided MHICM patients by MHICM staff. Additional stop codes may not be taken for the same workload. |
| 553 | | 2310.00 | DAY TREATMENT-GROUP | Records treatment to a group of patients with mental health and psychogeriatric disorder, for ongoing and rehabilitation services. Patients require clinical assistance and support for 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Day treatment clinics serve patients who are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|--------------------------------|-------------|----------|---|---|
| 554 | | 2310.00 | DAY HOSPITAL-GROUP | Records care provided to a group of patients for evaluation, treatment, and rehabilitation of patients with mental health disorders, who require intensive diagnostic and treatment services up to 4 to 8 hours per day, 3 to 7 days per week. Day hospital clinics are typically prioritized along the lines of <u>crisis treatment, transitional care, and rehabilitation</u> as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services. |
| 555 - Inactivated 4/1/97 | | 2316.00 | DRUG DEPENDENCE - GROUP | Records patients visits for group follow-up, treatment, and evaluation by a facility's formal Drug Dependence Treatment Program. Includes clinical and administrative services. |
| 556 - Inactivated 4/1/97 | | 2316.00 | ALCOHOL TREATMENT - GROUP | Records patient visits for a group follow-up, treatment, and evaluation by a facility's formal Alcohol Dependent Treatment Program. Includes clinical and administrative services. |
| 557+ | | 2310.00 | PSYCHIATRY – MD GROUP | Use when the MD-Psychiatrist's care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team. Records patients visit for the purpose of evaluation, follow-up, and treatment provided by a physician trained in mental, emotional, and behavioral disorders. May prescribe medications. Includes physician and administrative services. |
| 558+ | | 2310.00 | PSYCHOLOGY - GROUP | Use when the psychologist's care is not delivered in an interdisciplinary clinic setting such as a MH Clinic or PTSD Clinical Team. Records patients visit for the purpose of evaluation, follow-up, and treatment provided by a psychologist. Includes administrative services. |
| 559 | | 2314.00 | PSYCHOSOCIAL REHABILITATION GROUP | Records group services provided to aid veterans' successful community re-entry, i.e., case management, advocacy, counseling, social and living skills development, interviews, etc. (For use by psychosocial rehabilitation programs where more specific DSS Identifiers do not exist). |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|---|---|
| | 559713++ | 2314.00 | GAMBLING ADDICTION GROUP | Records MH professional: physician, psychologist, social worker, or nurse for the purpose of providing group therapy for gambling addiction. |
| 560 | | 2316.00 | SUBSTANCE ABUSE - GROUP | Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. |
| | 560461 | 2316.00 | GROUP SUBSTANCE ABUSE: ALCOHOL DEPENDENCE | Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating alcohol-dependent clients. |
| | 560469 | 2316.00 | GROUP SUBSTANCE ABUSE: DRUG DEPENDENCE | Records patient visits for group follow-up, treatment, and/or evaluation by a facility's formal Substance Abuse Treatment Program. Includes clinical and administrative services. For a program exclusively treating drug-dependent clients. |
| 561 | | 2313.00 | PCT-POST TRAUMATIC STRESS GROUP | Records group therapy provided to patients with diagnosis of PTSD. Treatment is provided by Specialty Multidisciplinary clinical team. PC. |
| 562 | | 2311.00 | PTSD - INDIVIDUAL | Records consultation, evaluation, follow-up, and/or treatment provided to an individual with PTSD. This activity does not take place through a designated PTSD clinical team. Includes clinical and administrative services. |
| 563+ | | 2330.00 | MENTAL HEALTH PRIMARY CARE TEAM - GROUP | Records care provided to a group of patients assigned to a Mental Health Primary Care Team characterized by a coordinated interdisciplinary approach consisting of; (a) intake and initial needs assessment; (b) health promotion and disease prevention; (c) management of acute and chronic biopsychosocial conditions; (d) access to other components of health care; (e) continuity of care; and (f) patient and non- professional care giver education and training. Includes clinical and administrative services. According to VHA policy. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|--|--|
| 564 ^w | | 2311.00 | MH TEAM CASE MANAGEMENT | Records visits with patients and/or their families or caregivers by members of a MH case management team performing MH community case management at all locations. Includes administrative and clinical services provided to patients by team members. <u>NOT</u> to be used for visits by MHICM teams (see DSS Identifier #552), or for case management by individuals who use other stop codes). |
| 565++ | | 2310.00 | MH MEDICAL CARE ONLY - GROUP | For use by MH clinicians who provide group services to patients in clinics other than MH where the primary diagnosis for the visit (on the encounter form) is medical rather than psychiatric. <u>Such non-psychiatric diagnoses would fail to trigger the GAF expectation.</u> Examples of such interventions for non-psychiatric illness include: chronic pain (in the absence of pain disorder or somatoform disorder), essential hypertension, low back pain, migraine headache, post-traumatic motor neuron re-education, simple obesity, psychological treatment of reflex sympathetic dystrophy. Where there is concurrent treatment by that clinician of a psychiatric condition, even in a non-MH venue, appropriate psychiatric diagnoses including the GAF are to be used. Visits in non-MH venues, for conditions primarily diagnosable under DSM IV, will continue to be placed in the appropriate program-specific stop code with a full multi-axial diagnosis, including GAF. |
| 566++ | | 2310.00 | MH RISK-FACTOR REDUCTION EDUCATIONAL GROUP | Captures workload, primarily psycho-educational in nature, provided in group sessions. Groups typically are informational in nature and are provided by MH personnel who may teach strategies for accomplishing some therapeutic goal (smoking cessation, diabetic education, cardiac rehabilitation, etc.). Such groups are typically time-limited and the visits are coded under CPT-4 as patient “counseling and/or risk reduction groups” (99411, 99412). A GAF is not required. Where services, such as smoking cessation groups, are provided as interventions, then full diagnostic codes (nicotine dependence and GAF) are to be applied. These services are typically coded as Group Therapy under the CPT-4 system and are <u>not eligible for</u> this stop code. These latter patients should be placed in the appropriate program-specific group therapy stop code, and the appropriate diagnostic code(s), including GAFs are to be applied. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|------------------------------|----------|---|---|
| | 566707++ | 2310.00 | SMOKING CESSATION GROUP | Records MH professional: physician, psychologist, social worker, or nurse providing primarily psycho-educational information in group sessions for the purpose of assisting smoking cessation. No GAF required. |
| 573+ | | 2314.00 | MH INCENTIVE THERAPY-GROUP | Records patient visit for, or work activity in, the Incentive Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS. This is a rehabilitation program provided under 38 U.S.C. 618(A) which authorizes assignment of patients to various in-hospital work situations. Pay scale is up to one-half minimum wage. This program is supported by medical care funds. NOTE: <i>A GAF is not required for this stop.</i> |
| 574+ | | 2314.00 | MH COMPENSATED WORK THERAPY (CWT) GROUP | Records patient visit for evaluation for, or work activity in, the CWT/Veterans Industries (VI) Program provided by Psychology, Psychiatry, Social Work, Domiciliary, or other service other than PM&RS. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the Special Therapeutic and Rehabilitation Activities Fund (STRAF) account at the VA facility. NOTE: <i>A GAF is not required for this stop.</i> |
| | 574513 – Inactivated 10/1/98 | 2314.00‡ | MH CWT/ SUBSTANCE ABUSE | Records CWT patient visits by outpatients who are in a Substance Abuse Program that was enhanced to Support CWT. Included here are evaluations for, work activity in, the CWT/VI Program provided by Psychology, Psychiatry, Social Work, Domiciliary, and services other than PM&RS. Involves work subcontracted from and paid for by public and/or private organizations including the Federal government. Patients are paid, based on productive capabilities, from the STRAF account at the VA facility. |
| 575 | | 2314.00 | MH VOCATIONAL ASSISTANCE GROUP | Records patient visit for vocational testing, assessment, guidance, counseling, or hands-on treatment provided by the Vocational Rehabilitation Therapy Program provided by Psychology, Psychiatry, Social Work, Domiciliary or any other service other than PM&RS. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VISTA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|-------------------------------------|--|
| 576 | | 2311.00 | PSYCHO-GERIATRIC CLINIC, INDIVIDUAL | Records individual evaluation, consultation, and/or treatment by clinical staff in a designated psycho-geriatric outpatient clinic. Includes clinical and administrative services. |
| 577 | | 2310.00 | PSYCHO-GERIATRIC CLINIC, GROUP | Records treatment, evaluation, and/or rehabilitation provided to a group of patients in a designated psycho-geriatric clinic. Includes clinical and administrative services. |
| 578 | | 2310.00 | PSYCHO-GERIATRIC DAY PROGRAM | Records all patient visits in a local or nationally designated psycho-geriatric day program for ongoing treatment and rehabilitation of psychogeriatric disorders. Includes clinical and administrative services. |
| 579 ^ψ | | 2780.00 | TELEPHONE/PSYCHO-GERIATRICS | Records patient consultation of medical care management, advice, and/or referral provided by telephone contact between patient or patient's relative and/or caregivers and the clinical and professional staff assigned to a designated psycho-geriatric program. Includes administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism, or alcohol abuse, infection with HIV, or sickle cell anemia are strictly confidential and may not be released or discussed unless there is a written consent from the individual. |
| 580 | | 2310.00 | PTSD DAY HOSPITAL | Records psychiatric treatment to an individual or group of patients diagnosed with post traumatic stress disorders, who require <u>intensive diagnostic and treatment services</u> up to 4 to 8 hours per day, 3 to 7 days per week. PTSD day hospital clinics typically are prioritized along the lines of crisis treatment, transitional care, and rehabilitation as opposed to continuing care and community maintenance. Patients are often severely and acutely ill at time of referral, and the individual's length of stay is time-limited. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------|-------------|----------|--|---|
| 581 | | 2310.00 | PTSD DAY TREATMENT | Records therapeutic psychiatric outpatient services to an individual or a group of patients diagnosed with PTSD, who require clinical assistance and support up to 4 to 8 hours per day, 3 to 7 days per week for <u>continuing care and community maintenance</u> . Patients in day treatment are less acutely ill, would likely have longer lengths of stay and require less intensive staffing than found in a day hospital setting. |
| 589 | | 2311.00 | NON-ACTIVE DUTY SEX TRAUMA | Records patient visit for appropriate care and services to a veteran for a psychological injury, illness or other condition determined to be the result of a physical assault, battery, or harassment experienced during childhood; any pre-active and post active duty status (<u>Not On Active Duty</u>). Services include clinical and administrative services. (Public Law 102-585) If Trauma occurred on Active Duty, use 524. |
| 590 | | 2319.00 | COMMUNITY OUTREACH TO HOMELESS VETS BY STAFF OTHER THAN HCHV AND DCHV PROGRAMS | Records outreach services to veterans carried out by VA staff other than designated staff of the HCHV or Domiciliary Care for Veterans (DCHV) programs. |
| 602 | | 2410.00 | CHRONIC ASSISTED HEMODIALYSIS TREATMENT | Records visit for the purpose of receiving hemodialysis. Includes clinical and administrative services. |
| 603 | | 2410.00 | LIMITED SELF CARE HEMODIALYSIS TREATMENT | Records visits where patient assists in hemodialysis and requires only limited staff assistance. |
| 604 | | 2410.00 | HOME/SELF HEMODIALYSIS TRAINING TREATMENT | Records outpatient for the purpose of education and/or training in the techniques of performing hemodialysis at veteran's residence or receiving dialysis at a facility. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|--|--|
| 606 | | 2410.00 | CHRONIC ASSISTED PERITONEAL DIALYSIS | Records outpatient visit for the purpose of receiving peritoneum dialysis. Includes clinical and administrative services. |
| 607 | | 2410.00 | LIMITED SELF CARE PERITONEAL DIALYSIS | Records visit where patient actively assists in own peritoneal dialysis treatments and requires only limited staff assistance. |
| 608 | | 2410.00 | HOME/SELF PERITONEAL DIALYSIS TRAINING | Records outpatient visit for the purpose of education and/or training in the techniques of performing peritoneal dialysis at veteran's residence or peritoneal dialysis at a facility. Includes clinical and administrative services. |
| 610 | | N/A* | CONTRACT DIALYSIS | Records visit for Contract Dialysis. Includes services on contract for Contract Dialysis and related Medical services provided to veteran patients. |
| 611 ^ψ | | 2780.00 | TELEPHONE/ DIALYSIS | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and clinical and/or professional staff assigned to the Dialysis treatment team. Includes the administrative and clinical services. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, sickle cell anemia, are strictly confidential, and may not be released or discussed unless there is a written consent from the individual. |
| 650 ^ψ | | N/A | CONTRACT NURSING HOME DAYS | Records number of Contract Nursing Home days which the patient had in VA-paid, Vendor-provided Contract Nursing Home for that month. <i>Not for use on PCE. Only for use on ECS.</i> |
| 651 ^ψ | | N/A | STATE NURSING HOME DAYS | Records number of State Nursing Home (SNH) days which the patient had in a VA-paid, State-provided SNH for that month. <i>Not for use on PCE. Only for use on ECS.</i> |

TABLE F, FY2000 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|---------------------------------|--|
| 652 ^ψ | | N/A | STATE DOMICILIARY HOME DAYS | Records number of State Domiciliary home days which the veteran had in a VA-paid State home for that month. <i>Not for use on PCE. Only for use on ECS.</i> |
| 653 ^ψ | | N/A | STATE HOSPITAL CARE | Records information about State Hospital Days and other information which a veteran had in a VA-paid State Hospital. <i>Not for use on PCE. Only for use on ECS.</i> |
| 654++ | | N/A | NON-VA RESIDENTIAL CARE DAYS | Records number of non-VA residential home days which the patient had in a VA-paid non-VA residential home for that month. Non-VA Special Residential Care (e.g., psychiatric or alcohol rehabilitation programs). <i>Not for use on PCE. Only for use on ECS.</i> |
| 655++ | | N/A | COMMUNITY NON-VA CARE | Pilot Hawaii program only in FY 2002. This stopcode is to be used <u>only</u> in ECS, <u>never</u> in PCE. |
| 656++ | | N/A | DOD NON-VA CARE | Pilot Hawaii program only in FY 2002. This stopcode is to be used <u>only</u> in ECS, <u>never</u> in PCE. |
| 657++ | | N/A | ASSISTED LIVING VENDOR WORK | Records (bedday) workload for VA-paid Assisted Living Facilities. (Use only for V20 pilot in FY 2002.) NOTE: <i>Never in PCE.</i> |
| 660++ | | N/A | CHIROPRACTIC CARE OUTSIDE VA | Consultation, evaluation, follow-up and/or treatment by a licensed doctor of chiropractic for chiropractic spinal manipulative therapy for musculoskeletal problems of the spine, as specified in VHA policy. Care is not delivered within a VA medical center. Includes clinical services and administrative services. NOTE: <i>For chiropractic care delivered within a VA medical center, see Stop Code 436.</i> |
| 670++ | | N/A | ASSISTED LIVING VHA-PAID, STAFF | VHA staff coordinating and providing evaluation for patients in VHA-paid Assisted Living facilities. NOTE: <i>Mainly V20 pilot in FY 2002.</i> |
| 680 ^ψ | | N/A | HCHC ASSESSMENT | Visit by VA medical center staff to a patient at home or in a community center to provide assessment for or about vendor-provided home and/or community health care (HCHC). Specifically applies to VA staff visits to patients referred to VA-paid, vendor-provided HCHC. For VA staff-provided home care not specifically meeting criteria for stops 170-178 or 680, use stop code 118. |

TABLE F, FY2000 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|------------------|----------|---------------------------------|--|
| 681 ^ψ | | N/A | VA-PAID HCHC | Records number of visits per month provided to a veteran by a VA-paid HCHC vendor. <i>Not for use on PCE. Only for use on ECS.</i> |
| 682 ^ψ | | N/A | VA-REFERRALS TO HCHC PROVIDERS | Records for statistics only the VA-referrals for HCHC Services of patients seen by VA medical center staff in clinic or home settings. Should not be used to report VA medical center Full-time Equivalent (FTE) staff time actually assessing for patients cared for by VA-paid, vendor-provided HCHC. For that work use 680. <i>Not for use on PCE. Only for use on ECS.</i> |
| | 690 ^ψ | N/A* | TELEMEDICINE | Records care for patients provided by telemedicine consultation services. This secondary code can be attached to any primary stop code related to the workgroup that provides telemedicine consultations (SCI, Dermatology, Eye, Radiology, etc.) |
| | 691++ | 2110.00 | PRE-EMP PHYS MILITARY PERSONNEL | Includes patient encounter with inter-disciplinary team, or health care clinician who is accountable for addressing the majority of health care needs and developing a sustained partnership with patients as required. This credit pair is specifically for special pre-employment physicals for Peace Corps and Active Duty Military Personnel. <i>691 may be used as a credit pair with other primary stops such as 102 and 301, as required.</i> |
| | *701 thru 711 | N/A* | DSS Credit Pairs | Generally used as secondary stop code for modifier to collect special statistics (with a primary stop code like 301 or 323). |
| | 701 | N/A* | HYPERTENSION SCREENING | Records outpatient visit for the purpose of measurement, consultation, and/or education relating to controlling high blood pressure. Includes clinical and administrative services. |
| | 702 | N/A* | CHOLESTEROL SCREENING | Records outpatient visit for the purpose of consultation and/or education in methods of improving serum cholesterol levels. Includes clinical and administrative services. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|----------------------|--------------------|-----------------|---------------------------------------|---|
| | 703 | N/A* | MAMMOGRAM | Records outpatient visit for the purpose of mammary gland x-ray. Includes clinical and administrative services. (Age restriction eliminated.) |
| | 704 | N/A* | PAP TEST | Records female outpatient visit for the purpose of cervical and/or vaginal examination for cancer screening. Includes clinical and administrative services. (Age restriction eliminated.) |
| | 705 | N/A* | FOBT - GUIAC SCREENING | Records outpatient visit for the purpose of testing for blood in stool. Includes clinical and administrative services. |
| | 706 | N/A* | ALCOHOL SCREENING | Records outpatient visit for the purpose of screening veterans for potential admission into the alcohol treatment unit or program. Includes clinical and administrative services. |
| | 707 | N/A* | SMOKING CESSATION | Records outpatient visit for the purpose of counseling and/or instruction in various methods to stop smoking. Includes clinical and administrative services. |
| | 708 | N/A* | NUTRITION | Records outpatient visit for the purpose of consultation and/or education in dietary and nutritional health (including weight control). Includes clinical and administrative services. |
| | 709 | N/A* | PHYSICAL FITNESS/ EXERCISE COUNSELING | Records outpatient visit for the purpose of consultation and/or education in proper exercise and fitness techniques. Includes clinical and administrative services. |
| | 710 | N/A* | INFLUENZA IMMUNIZATION | Records outpatient visit for the purpose of influenza immunization injection. Includes clinical and administrative services. Is not restricted to veterans. |
| | 711 | N/A* | INJURY COUNSEL/ SEAT BELT USAGE | Records outpatient consultation and/or education in prevention of injuries. Includes clinical and administrative services. |
| | 712 ^ψ | N/A* | HEP C REGISTRY PATIENT | Used as a secondary stop. Indicates clinic care was provided for patients who had a previously confirmed Hepatitis C diagnosis. May be used with relevant primary codes such as 307. |
| | 713++ | | GAMBLING ADDICTION | Treatment for gambling addiction in non-MH setting. The primary stop would be the clinic providing the treatment. |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|------------------|-------------|----------|--|--|
| 725 | | 5115.00 | DOMICILIARY OUTREACH SERVICES | Records visit made by VA domiciliary staff relating to case-finding and/or contract services to homeless veterans. Includes clinical and administrative services. |
| 726 | | 5115.00 | DOMICILIARY AFTERCARE - COMMUNITY | Records visit made by VA domiciliary staff for care to discharged domiciliary patients being followed in the community as part of a domiciliary discharge plan. Includes clinical and administrative services. |
| 727 | | 2750.00 | DOMICILIARY AFTERCARE-VA | Records outpatient visit of discharged domiciliary patients to a VA domiciliary follow-up clinic for care as part of a domiciliary discharge plan. Includes clinical and administrative services. |
| 728 | | 2111.00‡ | DOMICILIARY ADMISSION SCREENING SERVICES | Records all activities associated and involved in the admitting and screening process of patients applying for Domiciliary care. This includes administrative, physician, nursing and ancillary services. |
| 729 ^ψ | | 2780.00 | TELEPHONE/ DOMICILIARY | Records patient consultation or medical care management, advice, and/or referral provided by telephone contact between patient or patient's next of kin and/or the person(s) with whom the patient has a meaningful relationship, and the clinical and/or professional staff assigned to the VA Domiciliary staff. **Provisions of 38 U.S.C. Section 7332 requires that records which reveal the identity, diagnosis, prognosis, or treatment of VA patients which relate to drug abuse, alcoholism or alcohol abuse, infection with HIV, or sickle cell anemia, are strictly confidential and may not be released or discussed unless there is written consent from the individual. |
| 730 | | | DOMICILIARY- GENERAL CARE | The use of this code is <u>optional</u> and should <u>only</u> be used for those facilities which desire to identify inpatient products via Event Capture. NOTE: Do not use for scheduling or cost purposes. |
| 731 | | N/A* | PRRTP- GENERAL CARE | The use of this code is <u>optional</u> and should <u>only</u> be used for those facilities who desire to identify residential care products via ECS. (Do <u>not</u> use for scheduling or cost purposes.) |

TABLE F, FY 2002 Outpatient DSS Identifier Definitions (Effective on VistA Software)

| DSS ID NUMBER | DSS ID PAIR | CDR ACCT | DSS ID NAME | DESCRIPTION |
|---------------------------------|------------------------|---------------------|--------------------|---|
| 900 - inactivated 10/1/98 | | N/A* | SPECIAL SERVICES | Use in conjunction with appropriate credit stop code when an ambulatory procedure is performed. Also need to annotate the appropriate CPT code for the procedure. |
| 999 ^w | | 2610.00 | EMPLOYEE HEALTH | Records visit of employee to a designated employee health service. Includes physician services and clinical services and administrative services. |
| | 999510 | | PSO-EAP | Optional |

ATTACHMENT K

ANCILLARY STOP CODES AND HEALTH ADMINISTRATION SERVICE (HAS) EXEMPT STOP CODES

NOTE: Other lists of value in analyzing Department of Veterans Affairs (VA) medical center Decision Support System (DSS) Identifiers use Attachment L, or in creating detailed DSS outpatient clinic feederkeys use Attachment M.

| DSS IDENTIFIER | | DESCRIPTION |
|----------------|----------|---|
| Ancillary | Exempt ♦ | |
| 104 | 104 | PULMONARY FUNCTION |
| 105 | 105 | X-RAY |
| 106 | 106 | Electroencephalogram (EEG) |
| 107 | 107 | Electrocardiogram (EKG) |
| | 107473 | ECHOCARDIOGRAM |
| 108 | 108 | LABORATORY |
| 109 | 109 | NUCLEAR MEDICINE |
| 115 | 115 | ULTRASOUND |
| 116 | | RESPIRATORY THERAPY |
| 126 | 126 | EVOKED POTENTIAL |
| 127 | 127 | TOPOGRAPHICAL BRAIN MAPPING |
| 128 | 128 | PROLONGED VIDEO-EEG |
| | 144 | RADIONUCLIDE THERAPY |
| 145 | 145 | PHARMACOLOGY/PHYSIOLOGIC NUCLEAR MYOCARDIAL PERFUSION STUDIES |
| 146 | 146 | Positron Emission Tomography (PET) |
| | 149 | RADIATION THERAPY TREATMENT |
| 150 | 150 | COMPUTERIZED TOMOGRAPHY (CT) |
| 151 | 151 | MAGNETIC RESONANCE IMAGING (MRI) |
| 152 | 152 | ANGIOGRAM CATHETERIZATION |
| 153 | 153 | INTERVENTIONAL RADIOGRAPHY |
| 154 | | Magnetoencephalography (MEG) |
| 155 | | INFO ASSISTS TECHNOLOGY |
| 538 | | PSYCHOLOGICAL TESTING |

♦ **Exempt:** This condition is set-up by Health Administration Service (HAS) software when these codes are used without credit pairs that are non-exempt. When the HAS software does not automatically make these exempt, local VA medical centers can use the “Other” International Classification of Diseases, 9th Edition, Clinical Modification (ICD-9-CM) code.

++ New DSS Identifier

VHA DIRECTIVE 2002-041**July 5, 2002**

| DSS IDENTIFIER | | DESCRIPTION |
|-----------------------|-----------------|---|
| Ancillary | Exempt ♦ | |
| 160 | 160 | CLINICAL PHARMACY |
| | 170 | Hospital Based Home Care (HBHC) - PHYSICIAN |
| 212 | | ELECTROMYOGRAM (EMG) |
| | 421 | VASCULAR LABORATORY |
| 423 | | PROSTHETIC SUPPLY DISPENSED SERVICES |
| | 703 | MAMMOGRAM |
| | 999 | EMPLOYEE HEALTH |

NOTE: Caution should be used when pairing exempt DSS identifiers with non-exempt, as the use of these types of pairings could result in rejects being generated when transmitting workload to the Austin Automation Center (AAC).

♦ **Exempt:** This condition is set-up by HAS software when these codes are used without credit pairs that are non-exempt. When the HAS software does not automatically make these exempt, local VA medical centers need to use the ICD-9 CM code, as appropriate.

TELEPHONE STOP CODE LIST

| DSS ID NUMBER | DSS ID PAIR | DSS ID NAME |
|----------------------|--------------------|---|
| 103 | | TELEPHONE TRIAGE |
| | 103801++ | IN-Veterans Integrated Service Network (VISN) PHONE TRIAGE – NOT Department of Veterans Affairs (VA) Medical Center |
| | 103802++ | OUT OF VISN, VA PHONE TRIAGE |
| | 103803++ | COMMERCIAL PHONE TRIAGE |
| 147 | | TELEPHONE/ANCILLARY |
| | 147209 | TELEPHONE Visual Impairment Service Team (VIST) |
| 148 | | TELEPHONE/DIAGNOSTIC |
| 169 | | TELEPHONE/CHAPLAIN |
| 178 | | Home-based Primary Care (HBPC)/TELEPHONE |
| 179 | | TELE-HOME CARE TECHNOLOGY UNIT |
| 181 | | TELEPHONE/DENTAL |
| 216 | | TELEPHONE/REHABILITATION (REHAB) AND SUPPORT |
| | 216203 | TELEPHONE AUDIOLOGY REHAB SERVICE SUPPORT |
| | 216204 | TELEPHONE SPEECH REHAB SUPPORT |
| 324 | | TELEPHONE/MEDICINE |
| 325 | | TELEPHONE/NEUROLOGY |
| 326 | | TELEPHONE/GERIATRICS |
| 424 | | TELEPHONE/SURGERY |
| 425 | | TELEPHONE/PROSTHETICS/ORTHOTICS |
| 428 | | TELEPHONE/OPTOMETRY |
| 527 | | TELEPHONE/GENERAL PSYCHIATRY |
| | 527564 | TELEPHONE Intensive Community Case Management (ICCM) |
| 528 | | TELEPHONE/HOMELESS MENTALLY ILL |
| 530 | | TELEPHONE/ Department of Housing and Urban Development – VA Shared Housing (HUD-VASH) |
| 536 | | TELEPHONE/ Mental Health (MH) VOCATIONAL ASSISTANCE |
| 537 | | TELEPHONE/ PSYCHOSOCIAL REHABILITATION |
| 542 | | TELEPHONE/Post-traumatic Stress Disorder (PTSD) |
| 545 | | TELEPHONE/SUBSTANCE ABUSE |
| | 545461 | TELEPHONE/SUBSTANCE ABUSE-ALCOHOL DEPENDENCE |
| | 545469 | TELEPHONE SUBSTANCE ABUSE-DRUG DEPENDENCE |
| 546 | | TELEPHONE/ Mental Health Intensive Case Management (MHICM) |
| 579 | | TELEPHONE/ PSYCHOGERIATRICS |
| 611 | | TELEPHONE/DIALYSIS |
| 729 | | TELEPHONE/DOMICILIARY |

++ New DSS Identifier

ATTACHMENT M

ALWAYS NON-BILLABLE DECISION SUPPORT SYSTEM (DSS) IDENTIFIERS

| Telephone ♦ ♦ | | |
|---------------|-------------|---|
| DSS ID NUMBER | DSS ID PAIR | DSS ID NAME |
| 103 | | TELEPHONE TRIAGE |
| 147 | | TELEPHONE/ANCILLARY |
| 148 | | TELEPHONE/DIAGNOSTIC |
| 169 | | TELEPHONE/CHAPLAIN |
| 178 | | Hospital-based Home Care (HBHC)/TELEPHONE |
| 179 | | TELE-HOME CARE TECHNOLOGY UNIT |
| 181 | | TELEPHONE/DENTAL |
| | 208466 | Domiciliary (DOM) Compensated Work Therapy (CWT) (not billable) |
| | 213466 | Veterans Education and Training at a Domiciliary (VETS ED/TRNG DOM) (not billable) |
| 216 | | TELEPHONE/Rehabilitation (REHAB) AND SUPPORT |
| | 216210 | SPINAL CORD INJURY TELEPHONE SUPPORT |
| 324 | | TELEPHONE/MEDICINE |
| 325 | | TELEPHONE/NEUROLOGY |
| 326 | | TELEPHONE/GERIATRICS |
| 424 | | TELEPHONE/SURGERY |
| 425 | | TELEPHONE/PROSTHETICS/ORTHOTICS |
| 428 | | TELEPHONE/OPTOMETRY |
| 527 | | TELEPHONE/GENERAL PSYCHIATRY |
| | 527654 | TELEPHONE MH TEAM CASE MANAGEMENT |
| 528 | | TELEPHONE/HOMELESS MENTALLY ILL (HMI) |
| 530 | | TELEPHONE/Department of Housing and Urban Development (HUD) – Department of Veterans Affairs (VA) Shared Housing (VASH) |
| 536 | | TELEPHONE/ Mental Health (MH) VOCATIONAL ASSISTANCE |
| 537 | | TELEPHONE/PSYCHOSOCIAL REHABILITATION |
| 542 | | TELEPHONE/Post-traumatic Stress Disorder (PTSD) |
| 545 | | TELEPHONE/SUBSTANCE ABUSE |
| 546 | | TELEPHONE/MHICM |
| | 545461 | TELEPHONE SUBSTANCE ABUSE TREATMENT – ALCOHOL DEPENDENCE |
| | 545469 | TELEPHONE SUBSTANCE ABUSE TREATMENT – DRUG DEPENDENCE |
| 579 | | TELEPHONE/PSYCHOGERIATRICS |
| 611 | | TELEPHONE/DIALYSIS |
| | 690 | TELEMEDICINE |
| 729 | | TELEPHONE/DOMICILIARY |

♦ ♦ Telephone is not billable to the insurance carrier, nor to the veteran for an Outpatient Therapy (OPT) copay; however, if the call results in a new prescription being written, prescription copayment charges are applicable.

VHA DIRECTIVE 2002-041**July 5, 2002**

| OTHER | | |
|--------------------------|------------------------|--|
| DSS ID NUMBER | DSS ID PAIR | DSS ID NAME |
| | 174202 | HBPC RECREATION THERAPY |
| | 174205 | HBPC PHYSICAL THERAPY |
| | 174206 | HBPC OCCUPATIONAL THERAPY |
| 524 | | ACTIVE DUTY SEX TRAUMA |
| 525 | | WOMEN'S STRESS DISORDER TREATMENT TEAMS |
| 650 | | CONTRACT NURSING HOME DAYS |
| 651 | | STATE NURSING HOME DAYS |
| 652 | | STATE DOMICILIARY HOME DAYS |
| 653 | | STATE HOSPITAL CARE |
| 680 | | HOME and/or COMMUNITY HEALTH CARE (HCHC) ASSESSMENT |
| 681 | | VA-paid HCHC |
| 682 | | VA-REFERRALS TO HCHC |
| | 712 | Hepatitis C (HEP C) REGISTRY PATIENT |
| 999 | | EMPLOYEE HEALTH |
| | 999510 | Psychology (PSO) - Employee Assistance Program (EAP) |
| | 510474 | PSYCHOLOGY RESEARCH |

ATTACHMENT N

**SOMETIMES NON-BILLABLE CLINICS WITH THESE STOPS MAY NEED
TO BE SET UP AS “NOT BILLABLE” ON HEALTH ADMINISTRATION
SERVICE (HAS) AUTOBILLER**

| SCREENINGS | | |
|------------------|----------------|---|
| DSS ID NUMBER | DSS ID PAIR | DSS ID NAME |
| 120 | | HEALTH SCREENING |
| | 701 | HYPERTENSION SCREENING |
| | 702 | CHOLESTEROL SCREENING |
| | 706 | ALCOHOL SCREENING |
| NUTRITION | | |
| 123 | | NUTRITION/DIETETICS/INDIVIDUAL |
| 124 | | NUTRITION/DIETETICS/GROUP |
| 175 | | Home Based Primary Care (HBPC) – DIETICIAN |
| CHAPLAIN | | |
| 165 | | BEREAVEMENT COUNSELING _χ |
| 166 | | CHAPLAIN SERVICE – INDIVIDUAL _χ |
| 167 | | CHAPLAIN SERVICE – GROUP _χ |
| 168 | | CHAPLAIN SERVICE – COLLATERAL _χ |
| SOCIAL WORK | | |
| 125 | | SOCIAL WORK SERVICE |
| 173 | | HBPC – SOCIAL WORKER |
| THERAPY | | |
| 174 | | HBPC – THERAPIST (also 174202, 174206, 174207) |
| 202 | | RECREATION THERAPY SERVICE |
| 206 | | OCCUPATIONAL THERAPY |
| 207 | | Physical Medicine and Rehabilitation Service (PM&RS) INCENTIVE THERAPY |
| 208 | | PM&RS COMPENSATED WORK THERAPY |
| 574 | | Mental Health (MH) COMPENSATED WORK THERAPY (CWT) GROUP |
| | 574513 | MH CWT/SUBSTANCE ABUSE |
| PHARMACY | | |
| 160 | | CLINICAL PHARMACY |

_χ In general these services are not billed. However, when chaplain professionals provide in-depth substance abuse counseling, co-lead mental health groups, perform specific family, unemployment, or crisis counseling roles, such work may be billable. States vary in their rules regarding reimbursement of clergy health professionals without mental health (non-clergy counseling) certifications. Each Veterans Integrated Service Network (VISN) and Department of Veterans Affairs (VA) medical center will need to find out the rules in the relevant State and bill clinic work for those stops accordingly. As a safety measure, clinics in these stops should all be

VHA DIRECTIVE 2002-041**July 5, 2002**

set as “not billed” and Medical Care Cost Funding Program can review specific care for billable status.

| SCREENINGS | | |
|--------------------------|------------------------|---|
| DSS ID NUMBER | DSS ID PAIR | DSS ID NAME |
| EDUCATION | | |
| | 306117 | DIABETES MELLITUS (DM) ED |
| | 604 | HOME/SELF HEMODIALYSIS TRAINING TREATMENT |
| | 608 | HOME/SELF PERITONEAL DIALYSIS TRAINING |
| | 711 | INJURY COUNSEL/SEAT BELT USAGE |
| | 707 | SMOKING CESSATION |
| | 708 | NUTRITION |
| OTHER | | |
| | 709 | PHYSICAL FITNESS/EXERCISE COUNSELING |
| 117 | | NURSING |
| | 117473 | Purified Protein Derivated (PPD) CLINIC (Tuberculosis) |
| | 117710 | FLUSHOT ^τ |
| 121 | | RESIDENTIAL CARE PROGRAM FOLLOW-UP |
| | 710 | INFLUENZA IMMUNIZATION ^τ |
| 176 | | HBPC – CLINICAL PHARMACIST |
| 177 | | HBPC – OTHER |
| 423 | | PROSTHETIC SERVICES |
| | 450485 | These stop codes are used at the discretion of each facility and may be established for a variety of reasons. |
| | 510474 | PSYCHOLOGY RESEARCH |
| 603 | | LIMITED SELF CARE HEMODIALYSIS TREATMENT |
| 607 | | LIMITED SELF CARE PERITONEAL DIALYSIS |

^τ Not billable if the only reason for attending the clinic was to receive the flu shot. If a flu shot is received in connection with another clinic visit, then the flu shot is billable.

ATTACHMENT O

**FISCAL YEAR 2000 SHORT DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS**

| CODE | SHORT DESCRIPTION |
|-------------|---|
| AETC | AMBULATORY EVALUATION AND TREATMENT CENTER |
| AFCC | Ambulatory Family Counseling (AFC) CLINIC |
| AGTO | AGENT ORANGE |
| AOTH | A OTHER |
| ASOR | AMBULATORY SURGERY PERFORMED IN AN OR |
| ASOT | AMBULATORY SURGERY PERFORMED IN AREA OTHER |
| ATEM | A TEAM |
| BARA | BAR 203-450 AUDIO |
| BOTH | B OTHER |
| BTEM | B TEAM |
| CASE | CASE MANAGEMENT |
| CHOL | CHOLESTEROL EDUCATION - DOUBLE PROVIDER |
| CMIO | CMI – CHRONICALLY MENTALLY ILL |
| COLL | COLLATERAL |
| COMN | COMMUNITY NURSING HOME |
| CONS | CONSULTATION |
| COOR | COORDINATOR |
| COTH | C OTHER |
| CPEX | COMPENSATION AND PENSION EXAMINATION |
| CTEM | C TEAM |
| DIAB | DIABETES EDUCATION |
| DIAG | DIAGNOSTIC PROCEDURES |
| DOMI | DOMICILIARY |
| DOTH | D OTHER |
| DPGP | DOUBLE PROVIDER - GROUP OF PATIENTS |
| DPIN | DOUBLE PROVIDER - INDIVIDUAL PATIENT |
| DPRO | DENTAL PROCEDURE |
| DTEM | D TEAM |
| EAPO | EMPLOYEE ASSISTANCE |
| EDUC | EDUCATION – NON-MD, i.e., non-physician |
| EOTH | E OTHER |
| ETEM | E TEAM |
| EXPX | EXPOSURE RADIATION |
| FAMI | FAMILY |
| FCAP | Family Centered Activities (FCA) 205-460 POOL (patient swimming pool) |
| FLUI | FLU INJECTION |
| FOLU | FOLLOW-UP |
| FOST | FOSTER CARE CLINIC |

VHA DIRECTIVE 2002-041**July 5, 2002**

| CODE | SHORT DESCRIPTION |
|-------------|--|
| FOTH | F OTHER |
| FTEM | F TEAM |
| GIPR | Gastrointestinal (GI) PROCEDURE |
| GLCM | GLUCOMETER |
| GMED | MEDIC |
| GOTH | G OTHER |
| GTEM | G TEAM |
| GULF | PERSIAN GULF WAR |
| HCHV | Health Care for Homeless veterans (HCHV) IN 501 STOP |
| HEMP | HEMATOLOGY PROCEDURE |
| HOME | RESIDENTIAL SCREENING |
| HOTH | H OTHER |
| HTEM | H TEAM |
| INJX | INJECTION |
| INPT | INPATIENT |
| INTE | INTERN |
| INVA | INVASIVE PROCEDURE |
| IVRX | Intervenous (IV) DRUGS/MEDICATION |
| KORE | KOREAN WAR |
| MISC | MISCELLANEOUS PROCEDURE |
| MNHM | MAIN HEALTH MAINTENANCE |
| NASS | NURSE ASSISTANT |
| NPRN | NURSE PRACTITIONER |
| NURS | NURSE |
| OFFF | OFF |
| ONNN | ON |
| OTHA | OTHER 1 |
| OTHB | OTHER 2 |
| OTHC | OTHER 3 |
| OTHD | OTHER 4 |
| OTHE | OTHER 5 |
| OTHF | OTHER 6 |
| OTHG | OTHER 7 |
| OUTP | OUTPATIENT |
| PBED | PRE BED CARE |
| POWO | MEN Prisoner(s) of War (POWS) |
| POWW | WOMEN POWS |
| PREV | PREVENTION |
| PRIA | PRIMARY CARE TEAM 1 |
| PRIB | PRIMARY CARE TEAM 2 |
| PRIC | PRIMARY CARE TEAM 3 |
| PRID | PRIMARY CARE TEAM 4 |
| PRIE | PRIMARY CARE TEAM 5 |
| PROC | PROCEDURE |
| PROP | PREOPERATIVE |
| PSYC | PSYCHOLOGIST |

July 5, 2002

| CODE | SHORT DESCRIPTION |
|-------------|---|
| REHA | REHABILITATION |
| REPE | REPEAT |
| RESI | RESIDENTIAL CLINIC |
| RSCH | RESEARCH ACTIVITIES |
| RXMN | MEDICATION (SUCH AS COUMADIN) MONITORING |
| SATA | SATELLITE CLINIC A |
| SATB | SATELLITE CLINIC B |
| SCRE | SCREENING |
| SCVT | SERVICE CONNECTED |
| SIGO | SINGLE |
| SOCW | SOCIAL WORKER |
| SPEC | SPECIAL |
| SPGP | SINGLE PROVIDER - GROUP OF PATIENTS |
| SPIN | SINGLE PROVIDER - INDIVIDUAL PATIENT |
| SSFU | STOP SMOKE FOLLOW-UP - INDIVIDUAL PATIENT |
| SSGD | STOP SMOKING GROUP DOUBLE PROVIDER |
| STRU | STRUCTURE LEARNING - GROUP OF PATIENTS |
| STUD | STUDENT PROVIDER - INDIVIDUAL PATIENT |
| TDIS | THOUGHT DISORDER - GROUP OF PATIENTS |
| TECH | TECHNICIAN |
| TENS | TENS CLINIC IN Physical Medicine and Rehabilitation Service (PM&RS) |
| TPGP | THREE OR MORE PROVIDERS - GROUP OF PATIENTS |
| TPIN | THREE OR MORE PROVIDERS - INDIVIDUAL PATIENT |
| TRAN | PRE- AND POST-TRANSPLANT CLINICAL ACTIVITIES |
| UNSC | UNSCHEDULED CLINIC |
| VIET | VIETNAM WAR |
| WCHR | WHEELCHAIR |

ATTACHMENT P

**FISCAL YEAR 2000 NATIONAL ALPHA CODE DESCRIPTION
DECISION SUPPORT SYSTEM (DSS) NATIONAL SUFFIXES FOR USE
WITH DSS IDENTIFIER CREDIT PAIRS AS FEEDER KEYS FOR
DSS INTERMEDIATE PRODUCTS**

| CODE | NATL ALPHA CODE DESCRIPTION |
|---------|---|
| AAAA | GENERAL PURPOSE 1 |
| BBBB | GENERAL PURPOSE 2 |
| XXXX | GENERAL PURPOSE 3 |
| YYYY | GENERAL PURPOSE 4 |
| IACT | CLINIC (CLI) FEEDER KEYS INACTIVE PRIOR TO START OF CURRENT PROCESSING YEAR |
| MDPA | PHYSICIAN ASSISTANT |
| NONC | NON-COUNT FOR DSS (USUALLY POINT TO STATES BUT USED TO AC6) |
| OPTC | OPHTHALMOLOGY TECHNICIAN |
| PHRM | CLINICAL PHARMACY |
| RECR | RECREATION THERAPY |
| KTIN | Kinesiotherapy (KT) INDIVIDUAL |
| KTGR | KT GROUP |
| MATI | Manual Arts Therapy (MAT) INDIVIDUAL |
| MATG | MAT GROUP |
| OTIN | Occupational Therapy (OT) INDIVIDUAL |
| OTGR | OT GROUP |
| PTIN | Physical Therapy (PT) INDIVIDUAL |
| PTGR | PT GROUP |
| SATP | SUBSTANCE ABUSE TREATMENT PROGRAM |
| STAT | POINT TO STATISTICS IN DSS |
| XREC | CLI FEEDER KEYS TRANSMITTED FOR DEMOGRAPHIC INFORMATION TO CREATE MORE COMPLETE ENCOUNTER |
| ZZZZ | NO LONGER ACTIVE |
| IOTH | I OTHER |
| JOTH to | J OTHER |
| ZOTH | Z OTHER |
| ITEM | I TEAM |
| JTEM to | J TEAM |
| ZTEM | Z TEAM |
| APRI | A PRIMARY CARE |
| BPRI to | B PRIMARY CARE |

VHA DIRECTIVE 2002-041**July 5, 2002**

| CODE | NATL ALPHA CODE DESCRIPTION |
|-------------|---|
| ZPRI | Z PRIMARY CARE |
| ASAT | SATELLITE A |
| BSAT to | SATELLITE B |
| ZSAT | SATELLITE Z |
| ACBC | CBC A |
| BCBC to | CBC B |
| HCBC | CBC H |
| ANUR | Registered Nurse (RN) MANAGED CLINIC A |
| BNUR to | RN MANAGED CLINIC B |
| HNUR | RN MANAGED CLINIC H |
| ACPX | Compensation and Pension (C&P) CLINIC PROFILE A |
| BCPX to | C&P CLINIC PROFILE B |
| HCPX | C&P CLINIC PROFILE H |
| ARED | RED TEAM A |
| BRED to | RED TEAM B |
| HRED | RED TEAM H |
| ABLU | BLUE TEAM A |
| BBLU to | BLUE TEAM B |
| HBLU | BLUE TEAM H |
| AYEL | YELLOW TEAM A |
| BYEL to | YELLOW TEAM B |
| HYEL | YELLOW TEAM H |

ATTACHMENT Q

EVENT CAPTURE AND/OR TEXT INTEGRATION UTILITY (TIU)
MENU TEMPLATE

1. To enhance single-entry, and sign-on functionality for Department of Veterans Affairs (VA) medical centers using Text Integration Utility (TIU) (with Clinic Patient Record System (CPRS) and Event Capture System (ECS) data entry), Decision Support System (DSS)-Troy has provided guidelines on how to set-up a menu template to help you as a provider, set-up a TIU and/or ECS-combined menu so one can go directly from entry of a TIU progress note to entry of an ECS procedure. **NOTE:** *For DSS users, this document is available electronically on the DSS national web site.*

NOTE: *Some sites have expressed a desire to enter Progress Notes for the same patients that they are entering into Event Capture. There are a couple of ways to accomplish this. One, obviously is to evoke each menu option within Event Capture and TIU independently. The other is via the use of a Menu Template.*

2. The following explains generically the steps one can go through to create a Menu Template. A Menu Template in simple terms is a short cut path from one option to another. Because Menu Templates take one through several menu paths, there are a couple of things that one needs to do before this will work. If any of the options one is ultimately going to be using, or will go through in the Menu Template, have a Security Key, then one must have that security key assigned to one. **NOTE:** *Event Capture menu's require the ECALLU Security Key.* For this to work correctly, one needs to have the menus you are going through (and ultimately going to be evoking) as a secondary menu option assigned to you, as well as being on your Primary Menu Option. The facility Information Resource Management Office can assist with the Security Key and assignment of the menu options.

NOTE: *The menu options are likely to be quite different from what is being shown in the example. Because of all the steps one will go through to set up a Menu Template, this has been set to show cause and effect; i.e., what happens when this is done.*

3. User responses in this example are shown bolded and underlined. What the user will see once the Menu Template is created and is actually being used has been provided. Comments to help you see where you are in this example (and what the steps mean) will be noted in bold italics. In this example, you want to be able to Enter/Edit Patient Procedures (Event Capture option) and then enter a Progress Note (TIU option, actual name is Enter of Progress Note).

NOTE: *If you experience difficulty setting this, contact the National Help Desk at 1-888-596-4357. Ask the person who answers the phone to log a National On-line Information Sharing (NOIS) for the Event Capture module. Explain that you are trying to set up a Menu Template and are having problems. For assistance with the TIU options, see the Clinical Coordinator or TIU Coordinator at your facility. A copy of these instructions will be provided to the Customer Support staff for Event Capture as well as to the Bedford Technical Services Help Desk.*

July 5, 2002

4. EXAMPLE

Good afternoon WILSON,TEST

You last signed on today at 12:50

ECS Event Capture Menu ...

TIU Progress Notes User Menu ...

Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **TBOX User's Toolbox**

Display User Characteristics

Edit User Characteristics

Electronic Signature code Edit

Menu Templates ...

Spooler Menu ...

Switch UCI

TaskMan User

User Help

Select User's Toolbox Option: **MENU Templates**

Create a new menu template

Delete a Menu Template

List all Menu Templates

Rename a menu template

Show all options in a Menu Template

Select Menu Templates Option: **CREATE a new menu template**

Do you want some brief instructions? [Y/N] N// **Y**

Creating a Menu Template

A menu template is a set of menu options that can be called at any menu prompt. This list of options will be executed from the top of the list to the bottom and then the user will be asked if he/she wants to execute that set of options again. Each menu template is stored in the person file with a unique name associated with it. A menu template is evoked by typing a left, square bracket followed by the template name. To create a menu template you will be led step-by-step through your menu trees, selecting an option from each menu presented. No jumping is allowed during the creation of a template because how you got there may be as important as the target option. All templates begin execution with your primary (sign-on) menu.

At the "Select...Option" prompt you may respond by typing:

1. An option from the menu presented to include that option in the template you are creating,
2. '?' to get a brief help message,
3. '??' to get this help message again,
4. '+' to store the template in your Person file, or
5. '^' to abandon the creation process and return to the regular menu system.

Select HELP SYSTEM action or <return>:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Once you've reviewed the help text for creating a menu template, you will see your Primary Menu displayed.

ECS Event Capture Menu ...
TIU Progress Notes User Menu ...
Progress Notes/Discharge Summary [TIU] ...

Choose one of the LOCAL MENU FOR TRAINING Options: **EVENT Capture Menu**
Begin by selecting the first menu option in the patch. Remember that to get to the Enter/Edit Patient Procedures menu (in this example), you have to go through the menu path.

Event Capture Menu (ECMENU) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE *This is displayed throughout this process and lets you see where you are.*

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

MGR Event Capture Management Menu ...
E Event Capture Data Entry ...
R Event Capture Reports ...
O Event Capture Online Documentation

Choose one of the Event Capture Menu Options: **E Event Capture Data Entry** *This is the sub-menu to get the Enter/Edit Patient Procedures option.*

Event Capture Data Entry (ECENTER) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

VHA DIRECTIVE 2002-041

July 5, 2002

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options: **ENTER/Edit Patient Procedures** *Now I select the Enter/Edit Patient Procedures option. This (in my example) is the only menu option I wish to execute in Event Capture.*

Enter/Edit Patient Procedures (ECPAT) This one? [Y/N] Y// **Y**

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

I am entering a return here to go up a level, my goal is to get back to the display of my Primary Menu option.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

Enter/Edit Patient Procedures
Batch Enter Data by Patient
Data Entry (Batch) by Procedure
Multiple Dates/Multiple Procedures Data Entry

Choose one of the Event Capture Data Entry Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entering a return to continue to go up a level.

MGR Event Capture Management Menu ...
E Event Capture Data Entry ...
R Event Capture Reports ...
O Event Capture Online Documentation

Choose one of the Event Capture Menu Options:

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

Entered a return to get to this display. Okay, now we're back to the display of my Primary Menu option. Next I want to select the TIU option. The final menu that I will execute in TIU is the Entry of Progress Note option.

ECS Event Capture Menu ...
TIU Progress Notes User Menu ...
Progress Notes/Discharge Summary [TIU] ...

Choose one of the LOCAL MENU FOR TRAINING Options: **PROGRESS NOTES/Discharge Summary [TIU]**

Progress Notes/Discharge Summary [TIU] (TIU MAIN MENU CLINICIAN) This one?
[Y/N] Y// Y

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

1 Progress Notes User Menu ...
2 Discharge Summary User Menu ...
3 Integrated Document Management ...
4 Personal Preferences ...

Choose one of the Progress Notes/Discharge Summary [TIU] Options: **1 Progress Notes User Menu** *This is the menu path I must take to get to the Entry of Progress Notes option.*

Progress Notes (PNs) User Menu (TIU MAIN MENU PN CLINICIAN) This one? [Y/N] Y//
Y

July 5, 2002

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

- 1 Entry of Progress Note
- 2 Review Progress Notes by Patient
- 2b Review Progress Notes
- 3 All MY UNSIGNED Progress Notes
- 4 Show Progress Notes Across Patients
- 5 Progress Notes Print Options ...
- 6 List Notes By Title
- 7 Search by Patient AND Title
- 8 Personal Preferences ...

Choose one of the Progress Notes User Menu Options: **1 Entry of Progress Note.** *This is the option that you want to execute, Entry of Progress Notes.*

Entry of Progress Note (TIU ENTER/EDIT PN) This one? [Y/N] Y// Y

CREATING A MENU TEMPLATE

Choose an option, type RETURN to back up one level, '+' to store the completed template, or '^' to quit.

- 1 Entry of Progress Note
- 2 Review Progress Notes by Patient
- 2b Review Progress Notes
- 3 All MY UNSIGNED Progress Notes
- 4 Show Progress Notes Across Patients
- 5 Progress Notes Print Options ...
- 6 List Notes By Title
- 7 Search by Patient AND Title
- 8 Personal Preferences ...

Choose one of the Progress Notes User Menu Options: ±

Since you've finished putting the desired options in your Menu Template, you enter a plus sign. This will store the Menu Template for future use.

You have chosen the following options in this order:

You will note that all the options and menus are displayed, this is just to show you what options you selected on your journey through the Menu Template.

July 5, 2002

LOCAL MENU FOR TRAINING (LOCAL MENU)

Event Capture Menu (ECMENU)

Event Capture Data Entry (ECENTER)

Enter/Edit Patient Procedures (ECPAT)

Event Capture Data Entry (ECENTER)

Event Capture Menu (ECMENU)

LOCAL MENU FOR TRAINING (LOCAL MENU)

Progress Notes/Discharge Summary [TIU] (TIU MAIN MENU CLINICIAN)

Progress Notes User Menu (TIU MAIN MENU PN CLINICIAN)

Entry of Progress Note (TIU ENTER/EDIT PN)

Are we in agreement so far? [Y/N] Y// Y

Fine. Since all menu-type options will be processed in the background you will only be asked to respond to the following:

This means that even though you selected all those options and menus in the setting up of the Menu Template, these are the only two options that you will be seeing once you select your Menu Template.

Enter/Edit Patient Procedures (ECPAT)

Entry of Progress Note (TIU ENTER/EDIT PN)

Are these the functions you want when you invoke this template? [Y/N] Y// Y

Enter a name (6 characters or less in UPPER CASE)

for this template or '^' to quit: **TEST**

'TEST' it is. In the future you will start this template by typing '[TEST'

After you have finished using 'TEST' will you want it to repeat? [Y/N] N// Y *This means that after you've entered a Progress Note (in this example), you can continue on using the Menu Template, you would be taken to the Enter/Edit Patient Procedures option in Event Capture.*

ECS Event Capture Menu ...

TIU Progress Notes User Menu ...

Progress Notes/Discharge Summary [TIU] ...

Select LOCAL MENU FOR TRAINING Option: **[TEST]** *Here's an example of how the Menu Template will work. Don't forget the left bracket.*

Loading TEST...

Enter/Edit Patient Procedures *Notice that it takes me to the Enter/Edit Patient Procedures option. You now proceed to enter the Event Capture date for this patient.*

VHA DIRECTIVE 2002-041

July 5, 2002

Event Capture Locations:

1. ALBANY
2. ALBANY OPC
3. HONOLULU OC, HI
4. MURFREESBORO, TN
5. TROY

Select Number: 1

Select DSS Unit: FRIDAY M010

Location: ALBANY

DSS Unit: FRIDAY

Select Patient: WILSON,MIKE 09-02-95 123459872 YES SC VETERAN
SMB SMB

Enter Date and Time of Procedure: NOW// (JAN 20, 1998@12:52) SINUSOIDAL VERTIC
AL AXIS ROTATION (#SP067)

Procedure: SINUSOIDAL VERTICAL AXIS ROTATION (#SP067)

ENTERING A NEW PROCEDURE FOR WILSON,MIKE ...

LOCATION: ALBANY

SERVICE: MEDICINE

SECTION: MEDICINE

CATEGORY: FRI-ONE

PROCEDURE: SINUSOIDAL VERTICAL AXIS ROTATION SP067

VOLUME: 1//

ORDERING SECTION: MEDICINE//

ASSOCIATED CLINIC: TEST

ICD-9 CODE: 401.9 401.9 HYPERTENSION NOS

...OK? Yes// (Yes)

IN/OUTPATIENT: O OUTPATIENT

AGENT ORANGE: N NO

RADIATION EXPOSURE: N NO

ENVIRONMENTAL CONTAMINANTS: N NO

SERVICE CONNECTED: N NO

Provider: WILSON,PATRICIA PLW 162 COMPUTER SPECIALIST

Occupation: Physician Assistant

Provider #2:

Location: ALBANY Service: MEDICINE
Section: MEDICINE DSS Unit: FRIDAY
Patient: WILSON,MIKE Procedure Date: Jan 20, 1998@12:52

1. Category : FRI-ONE WILSON, P
Procedure: SINUSOIDAL VERTICAL AXIS ROTATION (1) MEDICINE

Select a number to edit/delete, or enter N to create a New Procedure:

Location: ALBANY Service: MEDICINE
Section: MEDICINE DSS Unit: FRIDAY
Select Patient:

Once the data has been entered in Event Capture, you are now taken to the option to allow you to Enter a Progress Note (Entry of Progress Note option) in TIU.

--- Clinician's Menu ---

--- Clinician's Progress Notes Menu ---

Entry of Progress Note

Select PATIENT NAME: WILSON,MIKE 09-02-95 123459872 YES SC
VETERAN SMB SMB

TITLE: CRISIS NOTE TITLE

Creating new progress note...

Patient Location: SURGERY

Date/time of Admission: 06/24/97 13:10

Date/time of Note: NOW

Author of Note: WILSON,TEST

...OK? YES//

Calling text editor, please wait...

1>TESTING ECS AND TIU USE VIA MENU TEMPLATES

2>

EDIT Option:

VHA DIRECTIVE 2002-041

July 5, 2002

Saving CRISIS NOTE with changes...

Print this note? No// NO

You may enter another Progress Note. Press RETURN to exit.

Select PATIENT NAME:

Again? Y// Y If you type a YES here, you will go back to the Event Capture option. If you type a NO here, you will be exited from the Menu Template.

July 5, 2002

ATTACHMENT R

THE FY 2000 GERIATRICS AND EXTENDED CARE STRATEGIC HEALTHCARE GROUP (GECSHG) INITIATIVE

1. BACKGROUND FOR THE FISCAL YEAR (FY) 2000 GECSHG INITIATIVE TO CAPTURE NON-VA WORKLOAD IN THE MONTH CARE IS PROVIDED TO THE PATIENT

a. It is important to capture non-Department of Veterans Affairs (VA) workload in the month it occurs.

(1) It allows actual costs for the work on Financial Management System (FMS) ("830") to be applied to workload.

(2) It is entered into the National Veterans Health Administration (VHA) Database, Decision Support System (DSS) in the month the costs and workload are incurred.

b. The VHA spends more than \$1 billion per year for non-VA care for veterans. About 1/3 of this is for Community Nursing Home (CNH) Care. Another rapidly growing share is for Home and Community Health Care (HCHC), which is contracted care for outpatient Hospice, Adult Day Health Care (ADHC), Skilled Nursing, Home Health Aides (HHA) and others. Much of non-VA care is paid by VA medical center Fiscal Service using methods other than two bill paying packages, Fee and Beneficiary Travel. Ambulance travel is paid by Beneficiary Travel which overall cost the VHA \$143 million in fiscal year (FY) 2000. (A very rough estimate that less than 50-60 percent of this cost was for ambulances, some of which transported Long-term Care (LTC) patients). Sharing Agreements, ADHC and much of other HCHC care is paid directly by Fiscal Service and does not go through another bill paying package such as "Fee."

c. Meanwhile, the VHA Chief Information Officer (CIO) is planning to convert all VHA transaction packages from MUMPS to more modern COTS packages. A Price-Waterhouse (P-W) group is investigating an overall VHA package for non-VA workload reporting which meets Health Insurance Portability and Accountability Act (HIPAA) standards for electronic transmission of bills, patient records and payments between VHA and its Non-VA care vendors. The VHA Health Administration Service (HAS) Office is very impressed with the work that the P-W group has done finding very comprehensive and sophisticated contracted care packages developed for and used by private sector hospitals.

d. For FY 2000, VHA's Geriatrics and Extended Care Strategic Healthcare Group (GECSHG), aware that Congress was considering the Millennium Bill for LTC for VA, requested that the DSS Program Office assist them in developing a method which could be implemented nationwide for FY 2000 to capture non-VA workload in the month it is provided to the patient.

e. This type of timeliness of workload capture and reporting is critical for two reasons: (1) The authorizing clinicians (social workers for CNH; Community Health Nurses (CHNs), Nurses for HCHC) need reports of current month workload for clinical care and accurate budgeting and (2) the National VHA database responsible to provide Millennium Bill Measures and provide

VHA DIRECTIVE 2002-041

July 5, 2002

workload-cost integrated cost-workload reports is DSS. DSS requires that workload be reported for the month it, and its costs, are incurred for the patient. This is for quality of care analysis purposes as well as for accurate costing. All contracted non-VA care is costed to FMS the month it is provided to the patient. The Bill Paying Systems, like Beneficiary Travel, Fee, etc., send "adjustments" only to VHA Fiscal Cost Systems (as a total adjustment per month). Adjustments from bill-paying VHA systems are sent only when the actual bills exceed or are less than the estimates costed by FMS in the month the workload was provided to the patient.

f. The Business Practice of the authorizing clinicians for both CNH (Social Workers) and HCHC (CHNs) is to keep a patient care roster spreadsheet summarizing all the month's contracted care and the month's changes in same. The summary information on current workload is provided to Fiscal at the month's end to cost on FMS (via closing out the month's 1358s as required by VA Fiscal rules). The authorizing clinicians also now enter the month's workload on the Event Capture System (ECS), a generic Class I Veterans Health Information Systems and Technology Architecture (VistA) charge-capture system (others by automated upload of the spreadsheet or by rapid manual batch entry on the last day of the month). The information on authorization is also shared by the authorizing clinician to the "Fee" clerk in the case of CNH, so the file clerk can prepare CNH data entry for bill paying. The method to set-up ECS departments and products for CNH, State Nursing Home(SNH), State Domiciliary Care (SDC), State Hospital Care (SHC) and the HCHC Programs: (Hospice, ADHC, HHA, Skilled Care, Mental Health, Infusion Care and Home Oxygen) was developed by GECSHG field authorizing clinician groups and DSS so that DSS would receive the workload and cost data.

g. Education was provided to the authorizers of HCHC contract care; entire VHA Social Work Service authorizing all VHA CNH and to the entire group of CHN, August through September 1999 in how to set-up ECS for their non-VA care products, and how to capture the products monthly, as well as how to use the reports. Ongoing national calls and repeat training at the respective annual conferences has also been provided.

h. In FY 2001, GECSHG plans to provide a directive mandating CNH and HCHC workload capture on ECS for the month the patient receives the care. If the VHA purchases one of the P-W recommended universal non-VA contracted care capture systems and later successfully implements it, in the next 3-5 years a transition in LTC contract care workload entry can be made at that time.

i. The remainder of this attachment describes the method used to set-up and capture products by DSS department and VA cost center on ECS using relevant stop codes, in two sections: One each

(1) HCHC, and

(2) CNH, SNH, SDH, SHC, Chronically Medically Ill (CMI), Homeless Health Care (HHC).

July 5, 2002

2. FROM FY 2000; WORKLOAD AND COST CAPTURE FOR HOME AND COMMUNITY HEALTH CARE

a. Overall Approach

(1) In FY 2000, GECSHG requested all VA medical centers capture workload and costs associated for VA paid, vendor-provided home and community patient care.

(2) At the request of GECSHG, the DSS Bedford Technical Support Office (BTSO) Development Office provided a method for this timely workload capture by use of the VistA Class I generic product capture system, the ECS.

(a) Capturing these non-VA, HCHC-contracted care products increases accountability for this large chunk of VHA resources. In FY 2000, the use of the VistA ECS to record timely workload for contractor-provided home and community-based health care started.

(b) Three types of HCHC care are captured:

1. VA Staff work by coordinators of Community Health Nursing for Veterans to get HCHC provided by vendors, purchased by VA.

2. Actual visits per month by vendors to veterans for VA-Paid HCHC.

3. Referrals by HCHC staff for veterans to get non-VA paid, as well as VA-paid HCHC services, (days per month coverage).

(3) The Advantages of the GECSHG's ECS timely workload capture FY 2000 solution are:

(a) The non-VA workload and costs are captured for the month of the occurrence of both the costs (on the VA's monthly FMS Cost Report, the "830") and services occurred, not months later, when the bill was paid. This results in more accurate cost estimates and end of month adjustment to 1358s.

(b) ECS is already in use by all VA medical centers to capture other workload for programs not having a dedicated VistA feeder system. These include Social Work, Nurse Care Managers, Chaplaincy, Physical Medicine etc.

(c) ECS is easily set-up with DSS departments and/or products, short training time and excellent compliance for data entry requirement.

(d) ECS has an excellent suite of existing, immediately-available management reports, including workload reports by patient, by DSS unit, by provider, and by product.

(e) ECS data is easily accessible through Fileman inquiry for any other type of local VA medical center reporting or use.

(f) ECS automatedly loads into DSS monthly.

(g) ECS is the only way to set all HCHC workload into a National database. For HCHC data, this is the National DSS database.

VHA DIRECTIVE 2002-041

July 5, 2002

(4) In the standard business practice, the end of month reconciliation of Fiscal 1358s with the VA medical center's authorizing clinicians (HCHC Nurses') HCHC Spreadsheets (and/or ECS data) and FMS, the VHA's costing system, data is critical to provide most accurate costing. FMS (as required by VHA fiscal rules) needs to have the most accurate monthly estimates provided. This provides better cost data to both Cost Distribution Report (CDR) and DSS databases. Existing fee files (bill payment files) do not provide timely, accurate costing information to feed to the DSS patient database.

(5) Workload and cost information will reside in centralized DSS database for local, Veterans Integrated Service Network (VISN) and DSS National Rollup reporting, and reporting of the DSS-based Millenium Bill Measures.

(6) ECS work capture implementation requirements:

(a) Establish a list of all contract providers and patients currently receiving contract HCHC care.

(b) Review product lists and assign individual intermediate products for each contractor or for each type of contract for HCHC.

(c) Develop working relationship with persons responsible for program HCHC oversight, persons in your VA medical center responsible for 1358s and Event Capture administration, usually DSS Site Team or Information Resource Management Service (IRMS).

(d) Discuss shared implementation responsibilities.

(7) **Data Entry**

(a) Manual, as care is initiated, or stopped; or

(b) In very large centers, where care is collected on a spreadsheet, one can automatically load the spreadsheet to ECS monthly. This involves:

1. Excel spreadsheet containing contract facility and patient information, including specific HCHC products, being fast-loaded to ECS global once at the end of each month.

2. Some manual override of data required after auditing output and reconciling 1358s with Fiscal.

3. Monthly maintenance of spreadsheet, to include, adding and/or deleting patients and adjusting bed days as required.

b. **Method**

. (1) **New VA Fiscal Cost Centers.** Several new VA Fiscal Cost Centers for HCHC work were initiated in FY 2000. Table 1 reports the VA cost centers (VACC) for VHA-contracted HCHC.

July 5, 2002

TABLE 1. VA COST CENTERS FOR HCHC

| <i>Cost Center (Program Symbol)</i> | <i>Description</i> |
|---|---|
| 8333 | HCHC Adult Day Center – Geriatric Care limited to budget object code (BOC) 2581 and 2560. |
| 8343 | Homemaker HHA Service – Patient Homes: Includes cost for purchase or contracts for care by home health aides and services by homemakers. Services include personal care and assistance in activities of daily living, including maintenance of patient safety and personal hygiene, and provision of or preparation of food. These services are provided by non-skilled (i.e., non-professional) persons, under the supervision of a qualified professional. Direct professional nursing, rehabilitation, and other professional services, now covered by the fee-basis program, are not to be charged to this account. |
| 8345 | Contract Home Hospice: Cost of purchase or contract for hospice care provided at patient's home by a contractor of home hospice care. |
| 8346 | Contract Home Infusion: Cost of purchase or contract specifically for intravenous infusion service(s) provided at patient's home by a contractor, specializing in home intravenous infusion care. |
| 8347 | Contract Home Skilled Care: Cost of purchase or contract for skilled care such as a Nurse or Rehabilitation Specialist provided at patient's home by a contractor. |
| 8348 | Contract Home Mental Health (MH) Care: Cost of purchase or contract for mental health care by MH – specialists (such as a Nurse Practitioner in MH, a MH Social Worker, or other MH-trained health professional) provided at patient's home by a contractor, specializing in Home MH care. |
| 8349 | Contract Home Respiratory Care: Cost of purchase or contract for respiratory care including home delivery of oxygen (concentrators or tanks), ventilators and/or Respiratory Therapist care provided at patient's home by a contractor which specializes in home oxygen and respiratory care. Limited to BOC 2574 and BOC 2562. |

VHA DIRECTIVE 2002-041**July 5, 2002**

(2) **New VHA Stop Codes for Reporting Outpatient Non-VA HCHC Care.** New DSS Identifiers, (also known as Stop Codes) for HCHC were started in FY 2000. See Table 2. These codes record:

- (a) VA staff work of CHN staff (680);
- (b) Record visits per month per contractor per patient (681) and referrals only; and
- (c) As statistics only (682).

TABLE 2. RELEVANT VA STOP CODES (DSS IDENTIFIERS)

| Name and/or Description | Stop code | CDR Account | Effective Date | Definition | Category of Change |
|--|------------------|--------------------|-----------------------|--|---------------------------|
| HOME AND/OR COMMUNITY HEALTHCARE ASSESSMENT | 680 | N/A | 10/1/00 | Visit by VA medical center staff to a patient at home or in a community center to provide assessment for or about vendor-provided HCHC. Specifically applies to VA staff visits to patients referred to VA-paid, vendor-provided HCHC. For VA-staff provided home care not specifically meeting criteria for stops 170-178 or 680, use stop code 118. | |
| VA-PAID HCHC | 681 | N/A | 10/1/99 | Records number of visits per month provided to a veteran by a VA-paid HCHC vendor. <i>Not for use on Patient Care Encounter (PCE). Only for use on ECS.</i> | 1 |
| VA-REFERRALS TO HCHC PROVIDERS | 682 | N/A | 20/22 | Records for statistics only the VA-referrals for HCHC Services of patients seen by VA medical center staff in clinic or home settings. Should not be used to report VA medical center Full-time Equivalent (FTE) staff time actually assessing for patients cared for by VA-paid, vendor-provided HCHC. For that work use 680. <i>Not for use on PCE. Only for use on ECS.</i> | |

(3) **New Production Units and/or DSS Departments.** New ECS departments were created to assign both the new HCHC products and the VA cost center costs to, so that DSS could integrate workload and costs at the product level via its activity-based costing method. The information about each ECS department, required for set-up on ECS, and as found on site and VISN DSS Central Processing Unit (CPU) regions, is seen on Table 3.

July 5, 2002

TABLE 3. DSS and/or ECS DEPARTMENTS: HCHC DEPARTMENT SETUPS**(a) Most Common Home Health Programs**

| ECS FIELD | ATQ1 | A0P1 | A0K1 | ATR1 | ATS1 | ATY1 |
|-------------------------------|-----------------------------|---------------------------------------|--|---|----------------------------------|-------------------------------------|
| <i>DSS Unit</i> | <i>HCHC VA Staff</i> | <i>HCHC Staff Phone Clinic</i> | <i>HCHC* Referrals Statistics</i> | <i>HCHC Homemaker Healthcare</i> | <i>HCHC Skilled Nurse</i> | <i>HCHC Adult Day Center</i> |
| Service | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care |
| <i>Cost Center</i> | 824100 | 824100 | 834700* | 834300 | 834700 | 833300 |
| <i>Meical Specialty</i> | Geriatrics | Geriatrics | Geriatrics | Geriatrics | Geriatrics | Geriatrics |
| <i>DSS Unit Number</i> | ATQ1 | A0P1C | A0K1* | ATR1 | ATS1 | ATY1 |
| <i>Date Entry and/or Date</i> | Now | Now | Now | Now | Now | Now |
| <i>Send to PCE</i> | Y | Y | N | N | N | N |
| <i>Associated Stop code</i> | 680 | 147680 | 682 | 681 | 681 | 681 |

* This is just a default VACC so the data will be set-up on DSS. This department is statistics-only (not-costed)

(b) Other Home Health Programs

| ECS FIELD | ATU1 | ATV1 | ATW1 | ATX1 |
|-------------------------------|--|----------------------------------|---------------------------------------|-------------------------------------|
| <i>DSS Unit</i> | <i>HCHC Hospice Palliative Care</i> | <i>HCHC Infusion Care</i> | <i>HCHC Mental Health Care</i> | <i>HCHC Respiratory Care</i> |
| <i>Service</i> | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care |
| <i>Cost Center</i> | 834500 | 834600 | 834800 | 834900 |
| <i>Med Specialty</i> | Geriatrics | Geriatrics | Geriatrics | Geriatrics |
| <i>DSS Unit Number</i> | ATU1 | ATV1 | ATW1 | ATX1 |
| <i>Date Entry and/or Date</i> | Now | Now | Now | Now |
| <i>Send to PCE</i> | N | N | N | N |
| <i>Associated Stopcode</i> | 681 | 681 | 681 | 681 |

VHA DIRECTIVE 2002-041**July 5, 2002**

(4) **New National VHA-templated Products for HCHC Care.** Working with GECSHG and the National CHN nurses group (authorizing clinicians for HCHC in most cases, rarely social work authorizes), National VHA products were developed for the VA Community Home Health Nursing Care itself for each of the types of non-VA contracted care visits, and statistics-only products to capture referrals to Medicare and other agencies. These products per DSS production unit and/or department can be seen on Table 4. Table 4A is for VA Community Home Health Nursing Care products. Table 4B for Referrals-only statistics products and Table 4C for patient visits for HCHC contractor care.

TABLE 4A – CONTRACT CNH ECS PRODUCTS**FDR System = ECS****Stop Code = 650**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | CNH | CN146 | Bedday Comm Nur Home 146 | BdDyCNH146 | | not used |
| ECS | CNH | CN147 | Bedday Comm Nur Home 147 | BdDyCNH147 | | not used |
| ECS | CNH | CN148 | Bedday Comm Nur Home 148 | BdDyCNH148 | | not used |
| ECS | CNH | CN149 | Bedday Comm Nur Home 149 | BdDyCNH149 | | not used |
| ECS | CNH | CN150 | Bedday Comm Nur Home 150 | BdDyCNH150 | | not used |
| ECS | CNH | CN151 | Bedday Comm Nur Home 151 | BdDyCNH151 | | not used |
| ECS | CNH | CN152 | Bedday Comm Nur Home 152 | BdDyCNH152 | | not used |
| ECS | CNH | CN153 | Bedday Comm Nur Home 153 | BdDyCNH153 | | not used |
| ECS | CNH | CN154 | Bedday Comm Nur Home 154 | BdDyCNH154 | | not used |
| ECS | CNH | CN155 | Bedday Comm Nur Home 155 | BdDyCNH155 | | not used |
| ECS | CNH | CN156 | Bedday Comm Nur Home 156 | BdDyCNH156 | | not used |
| ECS | CNH | CN157 | Bedday Comm Nur Home 157 | BdDyCNH157 | | not used |
| ECS | CNH | CN158 | Bedday Comm Nur Home 158 | BdDyCNH158 | | not used |
| ECS | CNH | CN159 | Bedday Comm Nur Home 159 | BdDyCNH159 | | not used |
| ECS | CNH | CN160 | Bedday Comm Nur Home 160 | BdDyCNH160 | | not used |
| ECS | CNH | CN161 | Bedday Comm Nur Home 161 | BdDyCNH161 | | not used |
| ECS | CNH | CN162 | Bedday Comm Nur Home 162 | BdDyCNH162 | | not used |
| ECS | CNH | CN163 | Bedday Comm Nur Home 163 | BdDyCNH163 | | not used |
| ECS | CNH | CN164 | Bedday Comm Nur Home 164 | BdDyCNH164 | | not used |
| ECS | CNH | CN165 | Bedday Comm Nur Home 165 | BdDyCNH165 | | not used |
| ECS | CNH | CN166 | Bedday Comm Nur Home 166 | BdDyCNH166 | | not used |
| ECS | CNH | CN167 | Bedday Comm Nur Home 167 | BdDyCNH167 | | not used |
| ECS | CNH | CN168 | Bedday Comm Nur Home 168 | BdDyCNH168 | | not used |
| ECS | CNH | CN169 | Bedday Comm Nur Home 169 | BdDyCNH169 | | not used |
| ECS | CNH | CN170 | Bedday Comm Nur Home 170 | BdDyCNH170 | | not used |
| ECS | CNH | CN171 | Bedday Comm Nur Home 171 | BdDyCNH171 | | not used |

July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | CNH | CN172 | Bedday Comm Nur Home 172 | BdDyCNH172 | | not used |
| ECS | CNH | CN173 | Bedday Comm Nur Home 173 | BdDyCNH173 | | not used |
| ECS | CNH | CN174 | Bedday Comm Nur Home 174 | BdDyCNH174 | | not used |
| ECS | CNH | CN175 | Bedday Comm Nur Home 175 | BdDyCNH175 | | not used |
| ECS | CNH | CN176 | Bedday Comm Nur Home 176 | BdDyCNH176 | | not used |
| ECS | CNH | CN177 | Bedday Comm Nur Home 177 | BdDyCNH177 | | not used |
| ECS | CNH | CN178 | Bedday Comm Nur Home 178 | BdDyCNH178 | | not used |
| ECS | CNH | CN179 | Bedday Comm Nur Home 179 | BdDyCNH179 | | not used |
| ECS | CNH | CN180 | Bedday Comm Nur Home 180 | BdDyCNH180 | | not used |
| ECS | CNH | CN181 | Bedday Comm Nur Home 181 | BdDyCNH181 | | not used |
| ECS | CNH | CN182 | Bedday Comm Nur Home 182 | BdDyCNH182 | | not used |
| ECS | CNH | CN183 | Bedday Comm Nur Home 183 | BdDyCNH183 | | not used |
| ECS | CNH | CN184 | Bedday Comm Nur Home 184 | BdDyCNH184 | | not used |
| ECS | CNH | CN185 | Bedday Comm Nur Home 185 | BdDyCNH185 | | not used |
| ECS | CNH | CN186 | Bedday Comm Nur Home 186 | BdDyCNH186 | | not used |
| ECS | CNH | CN187 | Bedday Comm Nur Home 187 | BdDyCNH187 | | not used |
| ECS | CNH | CN188 | Bedday Comm Nur Home 188 | BdDyCNH188 | | not used |
| ECS | CNH | CN189 | Bedday Comm Nur Home 189 | BdDyCNH189 | | not used |
| ECS | CNH | CN190 | Bedday Comm Nur Home 190 | BdDyCNH190 | | not used |
| ECS | CNH | CN191 | Bedday Comm Nur Home 191 | BdDyCNH191 | | not used |
| ECS | CNH | CN192 | Bedday Comm Nur Home 192 | BdDyCNH192 | | not used |
| ECS | CNH | CN193 | Bedday Comm Nur Home 193 | BdDyCNH193 | | not used |
| ECS | CNH | CN194 | Bedday Comm Nur Home 194 | BdDyCNH194 | | not used |
| ECS | CNH | CN195 | Bedday Comm Nur Home 195 | BdDyCNH195 | | not used |
| ECS | CNH | CN196 | Bedday Comm Nur Home 196 | BdDyCNH196 | | not used |
| ECS | CNH | CN197 | Bedday Comm Nur Home 197 | BdDyCNH197 | | not used |
| ECS | CNH | CN198 | Bedday Comm Nur Home 198 | BdDyCNH198 | | not used |
| ECS | CNH | CN199 | Bedday Comm Nur Home 199 | BdDyCNH199 | | not used |
| ECS | CNH | CN200 | Bedday Comm Nur Home 200 | BdDyCNH200 | | not used |
| ECS | CNH | CN201 | Bedday Comm Nur Home 201 | BdDyCNH201 | | not used |
| ECS | CNH | CN202 | Bedday Comm Nur Home 202 | BdDyCNH202 | | not used |
| ECS | CNH | CN203 | Bedday Comm Nur Home 203 | BdDyCNH203 | | not used |
| ECS | CNH | CN204 | Bedday Comm Nur Home 204 | BdDyCNH204 | | not used |
| ECS | CNH | CN205 | Bedday Comm Nur Home 205 | BdDyCNH205 | | not used |
| ECS | CNH | CN206 | Bedday Comm Nur Home 206 | BdDyCNH206 | | not used |
| ECS | CNH | CN207 | Bedday Comm Nur Home 207 | BdDyCNH207 | | not used |
| ECS | CNH | CN208 | Bedday Comm Nur Home 208 | BdDyCNH208 | | not used |

VHA DIRECTIVE 2002-041**July 5, 2002**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | CNH | CN209 | Bedday Comm Nur Home 209 | BdDyCNH209 | | not used |
| ECS | CNH | CN210 | Bedday Comm Nur Home 210 | BdDyCNH210 | | not used |
| ECS | CNH | CN211 | Bedday Comm Nur Home 211 | BdDyCNH211 | | not used |

TABLE 4B – STATE NURSING HOME ECS PRODUCTS**FDR SYS = ECS****Stop Code = 651**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|----------------|----------------------|-----------------|----------------------------|------------------------------|-------------|--------------|
| ECS | SNH | SN001 | Bedday State Home 001 | BdDySN001 | | not used |
| ECS | SNH | SN002 | Bedday State Home 002 | BdDySN002 | | not used |
| ECS | SNH | SN003 | Bedday State Home 003 | BdDySN003 | | not used |
| ECS | SNH | SN004 | Bedday State Home 004 | BdDySN004 | | not used |
| ECS | SNH | SN005 | Bedday State Home 005 | BdDySN005 | | not used |
| ECS | SNH | SN006 | Bedday State Home 006 | BdDySN006 | | not used |
| ECS | SNH | SN007 | Bedday State Home 007 | BdDySN007 | | not used |
| ECS | SNH | SN008 | Bedday State Home 008 | BdDySN008 | | not used |
| ECS | SNH | SN009 | Bedday State Home 009 | BdDySN009 | | not used |
| ECS | SNH | SN010 | Bedday State Home 010 | BdDySN010 | | not used |
| ECS | SNH | SN011 | Bedday State Home 011 | BdDySN011 | | not used |
| ECS | SNH | SN012 | Bedday State Home 012 | BdDySN012 | | not used |
| ECS | SNH | SN013 | Bedday State Home 013 | BdDySN013 | | not used |
| ECS | SNH | SN014 | Bedday State Home 014 | BdDySN014 | | not used |
| ECS | SNH | SN015 | Bedday State Home 015 | BdDySN015 | | not used |
| ECS | SNH | SN016 | Bedday State Home 016 | BdDySN016 | | not used |
| ECS | SNH | SN017 | Bedday State Home 017 | BdDySN017 | | not used |
| ECS | SNH | SN018 | Bedday State Home 018 | BdDySN018 | | not used |
| ECS | SNH | SN019 | Bedday State Home 019 | BdDySN019 | | not used |
| ECS | SNH | SN020 | Bedday State Home 020 | BdDySN020 | | not used |
| ECS | SNH | SN021 | Bedday State Home 021 | BdDySN021 | | not used |
| ECS | SNH | SN022 | Bedday State Home 022 | BdDySN022 | | not used |
| ECS | SNH | SN023 | Bedday State Home 023 | BdDySN023 | | not used |
| ECS | SNH | SN024 | Bedday State Home 024 | BdDySN024 | | not used |
| ECS | SNH | SN025 | Bedday State Home 025 | BdDySN025 | | not used |
| ECS | SNH | SN026 | Bedday State Home 026 | BdDySN026 | | not used |
| ECS | SNH | SN027 | Bedday State Home 027 | BdDySN027 | | not used |

July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|----------------|------------------|-----------------|----------------------------|--------------------------|-------------|--------------|
| ECS | SNH | SN028 | Bedday State Home 028 | BdDySN028 | | not used |
| ECS | SNH | SN029 | Bedday State Home 029 | BdDySN029 | | not used |
| ECS | SNH | SN030 | Bedday State Home 030 | BdDySN030 | | not used |
| ECS | SNH | SN031 | Bedday State Home 031 | BdDySN031 | | not used |
| ECS | SNH | SN032 | Bedday State Home 032 | BdDySN032 | | not used |
| ECS | SNH | SN033 | Bedday State Home 033 | BdDySN033 | | not used |

TABLE 4C – STATE DOMICILLIARY HOME DAYS ECS PRODUCTS

FDR SYS = ECS
Stop Code = 652

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|----------------|------------------|-----------------|----------------------------|--------------------------|-------------|--------------|
| ECS | SDH | SD001 | Bedday State Dom 001 | BdDySD001 | | not used |
| ECS | SDH | SD002 | Bedday State Dom 002 | BdDySD002 | | not used |
| ECS | SDH | SD003 | Bedday State Dom 003 | BdDySD003 | | not used |
| ECS | SDH | SD004 | Bedday State Dom 004 | BdDySD004 | | not used |
| ECS | SDH | SD005 | Bedday State Dom 005 | BdDySD005 | | not used |
| ECS | SDH | SD006 | Bedday State Dom 006 | BdDySD006 | | not used |
| ECS | SDH | SD007 | Bedday State Dom 007 | BdDySD007 | | not used |
| ECS | SDH | SD008 | Bedday State Dom 008 | BdDySD008 | | not used |
| ECS | SDH | SD009 | Bedday State Dom 009 | BdDySD009 | | not used |
| ECS | SDH | SD010 | Bedday State Dom 010 | BdDySD010 | | not used |
| ECS | SDH | SD011 | Bedday State Dom 011 | BdDySD011 | | not used |
| ECS | SDH | SD012 | Bedday State Dom 012 | BdDySD012 | | not used |
| ECS | SDH | SD013 | Bedday State Dom 013 | BdDySD013 | | not used |
| ECS | SDH | SD014 | Bedday State Dom 014 | BdDySD014 | | not used |
| ECS | SDH | SD015 | Bedday State Dom 015 | BdDySD015 | | not used |
| ECS | SDH | SD016 | Bedday State Dom 016 | BdDySD016 | | not used |
| ECS | SDH | SD017 | Bedday State Dom 017 | BdDySD017 | | not used |
| ECS | SDH | SD018 | Bedday State Dom 018 | BdDySD018 | | not used |
| ECS | SDH | SD019 | Bedday State Dom 019 | BdDySD019 | | not used |
| ECS | SDH | SD020 | Bedday State Dom 020 | BdDySD020 | | not used |
| ECS | SDH | SD021 | Bedday State Dom 021 | BdDySD021 | | not used |
| ECS | SDH | SD022 | Bedday State Dom 022 | BdDySD022 | | not used |

VHA DIRECTIVE 2002-041**July 5, 2002**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | SDH | SD023 | Bedday State Dom 023 | BdDySD023 | | not used |
| ECS | SDH | SD024 | Bedday State Dom 024 | BdDySD024 | | not used |
| ECS | SDH | SD025 | Bedday State Dom 025 | BdDySD025 | | not used |
| ECS | SDH | SD026 | Bedday State Dom 026 | BdDySD026 | | not used |
| ECS | SDH | SD027 | Bedday State Dom 027 | BdDySD027 | | not used |
| ECS | SDH | SD028 | Bedday State Dom 028 | BdDySD028 | | not used |
| ECS | SDH | SD029 | Bedday State Dom 029 | BdDySD029 | | not used |
| ECS | SDH | SD030 | Bedday State Dom 030 | BdDySD030 | | not used |
| ECS | SDH | SD031 | Bedday State Dom 031 | BdDySD031 | | not used |
| ECS | SDH | SD032 | Bedday State Dom 032 | BdDySD032 | | not used |
| ECS | SDH | SD033 | Bedday State Dom 033 | BdDySD033 | | not used |
| ECS | SDH | SD034 | Bedday State Dom 034 | BdDySD034 | | not used |
| ECS | SDH | SD035 | Bedday State Dom 035 | BdDySD035 | | not used |
| ECS | SDH | SD036 | Bedday State Dom 036 | BdDySD036 | | not used |
| ECS | SDH | SD037 | Bedday State Dom 037 | BdDySD037 | | not used |
| ECS | SDH | SD038 | Bedday State Dom 038 | BdDySD038 | | not used |
| ECS | SDH | SD039 | Bedday State Dom 039 | BdDySD039 | | not used |
| ECS | SDH | SD040 | Bedday State Dom 040 | BdDySD040 | | not used |
| ECS | SDH | SD041 | Bedday State Dom 041 | BdDySD041 | | not used |
| ECS | SDH | SD042 | Bedday State Dom 042 | BdDySD042 | | not used |

TABLE 4D – STATE HOSPITAL CARE ECS PRODUCTS**FDR SYS = ECS****Stop Code = 653**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | SHC | SH001 | Bedday State Hospital 001 | BdDySHC001 | | not used |
| ECS | SHC | SH002 | Bedday State Hospital 002 | BdDySHC002 | | not used |
| ECS | SHC | SH003 | Bedday State Hospital 003 | BdDySHC003 | | not used |
| ECS | SHC | SH004 | Bedday State Hospital 004 | BdDySHC004 | | not used |
| ECS | SHC | SH005 | Bedday State Hospital 005 | BdDySHC005 | | not used |
| ECS | SHC | SH006 | Bedday State Hospital 006 | BdDySHC006 | | not used |
| ECS | SHC | SH007 | Bedday State Hospital 007 | BdDySHC007 | | not used |
| ECS | SHC | SH008 | Bedday State Hospital 008 | BdDySHC008 | | not used |
| ECS | SHC | SH009 | Bedday State Hospital 009 | BdDySHC009 | | not used |
| ECS | SHC | SH010 | Bedday State Hospital 010 | BdDySHC010 | | not used |

July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|------------|--------------|-------------|---------------------------|----------------------|------|----------|
| ECS | SHC | SH011 | Bedday State Hospital 011 | BdDySHC011 | | not used |
| ECS | SHC | SH012 | Bedday State Hospital 012 | BdDySHC012 | | not used |
| ECS | SHC | SH013 | Bedday State Hospital 013 | BdDySHC013 | | not used |
| ECS | SHC | SH014 | Bedday State Hospital 014 | BdDySHC014 | | not used |
| ECS | SHC | SH015 | Bedday State Hospital 015 | BdDySHC015 | | not used |
| ECS | SHC | SH016 | Bedday State Hospital 016 | BdDySHC016 | | not used |
| ECS | SHC | SH017 | Bedday State Hospital 017 | BdDySHC017 | | not used |
| ECS | SHC | SH018 | Bedday State Hospital 018 | BdDySHC018 | | not used |
| ECS | SHC | SH019 | Bedday State Hospital 019 | BdDySHC019 | | not used |
| ECS | SHC | SH020 | Bedday State Hospital 020 | BdDySHC020 | | not used |

TABLE 4E – ALCOHOL AND/OR DRUG REHAB PRODUCTS

FDR System = ECS

Stop Code = 654

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|------------|--------------|-------------|--------------------------|----------------------|-------|----------|
| ECS | ADHH | HA001 | ALCDRUG HALFWAY HOUSE 1 | ALCDRGH1 | 57626 | not used |
| ECS | ADHH | HA002 | ALCDRUG HALFWAY HOUSE 2 | ALCDRGH2 | 57630 | not used |
| ECS | ADHH | HA003 | ALCDRUG HALFWAY HOUSE 3 | ALCDRGH3 | 57631 | not used |
| ECS | ADHH | HA004 | ALCDRUG HALFWAY HOUSE 4 | ALCDRGH4 | 57632 | not used |
| ECS | ADHH | HA005 | ALCDRUG HALFWAY HOUSE 5 | ALCDRGH5 | 57633 | not used |
| ECS | ADHH | HA006 | ALCDRUG HALFWAY HOUSE 6 | ALCDRGH6 | 57634 | not used |
| ECS | ADHH | HA007 | ALCDRUG HALFWAY HOUSE 7 | ALCDRGH7 | 57635 | not used |
| ECS | ADHH | HA008 | ALCDRUG HALFWAY HOUSE 8 | ALCDRGH8 | 57636 | not used |
| ECS | ADHH | HA009 | ALCDRUG HALFWAY HOUSE 9 | ALCDRGH9 | 57637 | not used |
| ECS | ADHH | HA010 | ALCDRUG HALFWAY HOUSE 10 | ALCDRGH10 | 57638 | not used |
| ECS | ADHH | HA011 | ALCDRUG HALFWAY HOUSE 11 | ALCDRGH11 | 57639 | not used |
| ECS | ADHH | HA012 | ALCDRUG HALFWAY HOUSE 12 | ALCDRGH12 | 57640 | not used |
| ECS | ADHH | HA013 | ALCDRUG HALFWAY HOUSE 13 | ALCDRGH13 | 57641 | not used |
| ECS | ADHH | HA014 | ALCDRUG HALFWAY HOUSE 14 | ALCDRGH14 | 57642 | not used |
| ECS | ADHH | HA015 | ALCDRUG HALFWAY HOUSE 15 | ALCDRGH15 | 57643 | not used |
| ECS | ADHH | HA016 | ALCDRUG HALFWAY HOUSE 16 | ALCDRGH16 | 57644 | not used |
| ECS | ADHH | HA017 | ALCDRUG HALFWAY HOUSE 17 | ALCDRGH17 | 57645 | not used |
| ECS | ADHH | HA018 | ALCDRUG HALFWAY HOUSE 18 | ALCDRGH18 | 57646 | not used |
| ECS | ADHH | HA019 | ALCDRUG HALFWAY HOUSE 19 | ALCDRGH19 | 57647 | not used |
| ECS | ADHH | HA020 | ALCDRUG HALFWAY HOUSE 20 | ALCDRGH20 | 57648 | not used |
| ECS | ADHH | HA021 | ALCDRUG HALFWAY HOUSE 21 | ALCDRGH21 | 57649 | not used |
| ECS | ADHH | HA022 | ALCDRUG HALFWAY HOUSE 22 | ALCDRGH22 | 57650 | not used |

VHA DIRECTIVE 2002-041
July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|------------------------------|-------------|--------------|
| ECS | ADHH | HA023 | ALCDRUG HALFWAY HOUSE 23 | ALCDRGH23 | 57651 | not used |
| ECS | ADHH | HA024 | ALCDRUG HALFWAY HOUSE 24 | ALCDRGH24 | 57652 | not used |
| ECS | ADHH | HA025 | ALCDRUG HALFWAY HOUSE 25 | ALCDRGH25 | 57653 | not used |
| ECS | ADHH | HA026 | ALCDRUG HALFWAY HOUSE 26 | ALCDRGH26 | 57654 | not used |
| ECS | ADHH | HA027 | ALCDRUG HALFWAY HOUSE 27 | ALCDRGH27 | 57655 | not used |
| ECS | ADHH | HA028 | ALCDRUG HALFWAY HOUSE 28 | ALCDRGH28 | 57656 | not used |
| ECS | ADHH | HA029 | ALCDRUG HALFWAY HOUSE 29 | ALCDRGH29 | 57657 | not used |
| ECS | ADHH | HA030 | ALCDRUG HALFWAY HOUSE 30 | ALCDRGH30 | 57658 | not used |
| ECS | ADHH | HA031 | ALCDRUG HALFWAY HOUSE 31 | ALCDRGH31 | 57659 | not used |
| ECS | ADHH | HA032 | ALCDRUG HALFWAY HOUSE 32 | ALCDRGH32 | 57660 | not used |
| ECS | ADHH | HA033 | ALCDRUG HALFWAY HOUSE 33 | ALCDRGH33 | 57661 | not used |
| ECS | ADHH | HA034 | ALCDRUG HALFWAY HOUSE 34 | ALCDRGH34 | 57662 | not used |
| ECS | ADHH | HA035 | ALCDRUG HALFWAY HOUSE 35 | ALCDRGH35 | 57663 | not used |
| ECS | ADHH | HA036 | ALCDRUG HALFWAY HOUSE 36 | ALCDRGH36 | 57664 | not used |
| ECS | ADHH | HA037 | ALCDRUG HALFWAY HOUSE 37 | ALCDRGH37 | 57665 | not used |
| ECS | ADHH | HA038 | ALCDRUG HALFWAY HOUSE 38 | ALCDRGH38 | 57666 | not used |
| ECS | ADHH | HA039 | ALCDRUG HALFWAY HOUSE 39 | ALCDRGH39 | 57667 | not used |
| ECS | ADHH | HA040 | ALCDRUG HALFWAY HOUSE 40 | ALCDRGH40 | 57668 | not used |
| ECS | ADHH | HA041 | ALCDRUG HALFWAY HOUSE 41 | ALCDRGH41 | 57669 | not used |
| ECS | ADHH | HA042 | ALCDRUG HALFWAY HOUSE 42 | ALCDRGH42 | 57670 | not used |
| ECS | ADHH | HA043 | ALCDRUG HALFWAY HOUSE 43 | ALCDRGH43 | 57671 | not used |
| ECS | ADHH | HA044 | ALCDRUG HALFWAY HOUSE 44 | ALCDRGH44 | 57672 | not used |
| ECS | ADHH | HA045 | ALCDRUG HALFWAY HOUSE 45 | ALCDRGH45 | 57673 | not used |
| ECS | ADHH | HA046 | ALCDRUG HALFWAY HOUSE 46 | ALCDRGH46 | 57674 | not used |
| ECS | ADHH | HA047 | ALCDRUG HALFWAY HOUSE 47 | ALCDRGH47 | 57675 | not used |
| ECS | ADHH | HA048 | ALCDRUG HALFWAY HOUSE 48 | ALCDRGH48 | 57676 | not used |
| ECS | ADHH | HA049 | ALCDRUG HALFWAY HOUSE 49 | ALCDRGH49 | 57677 | not used |
| ECS | ADHH | HA050 | ALCDRUG HALFWAY HOUSE 50 | ALCDRGH50 | 57678 | not used |
| ECS | ADHH | HA051 | ALCDRUG HALFWAY HOUSE 51 | ALCDRGH51 | 57679 | not used |
| ECS | ADHH | HA052 | ALCDRUG HALFWAY HOUSE 52 | ALCDRGH52 | 57680 | not used |
| ECS | ADHH | HA053 | ALCDRUG HALFWAY HOUSE 53 | ALCDRGH53 | 57681 | not used |
| ECS | ADHH | HA054 | ALCDRUG HALFWAY HOUSE 54 | ALCDRGH54 | 57682 | not used |
| ECS | ADHH | HA055 | ALCDRUG HALFWAY HOUSE 55 | ALCDRGH55 | 57683 | not used |
| ECS | ADHH | HA056 | ALCDRUG HALFWAY HOUSE 56 | ALCDRGH56 | 57684 | not used |
| ECS | ADHH | HA057 | ALCDRUG HALFWAY HOUSE 57 | ALCDRGH57 | 57685 | not used |
| ECS | ADHH | HA058 | ALCDRUG HALFWAY HOUSE 58 | ALCDRGH58 | 57686 | not used |
| ECS | ADHH | HA059 | ALCDRUG HALFWAY HOUSE 59 | ALCDRGH59 | 57687 | not used |
| ECS | ADHH | HA060 | ALCDRUG HALFWAY HOUSE 60 | ALCDRGH60 | 57688 | not used |
| ECS | ADHH | HA061 | ALCDRUG HALFWAY HOUSE 61 | ALCDRGH61 | 57689 | not used |
| ECS | ADHH | HA062 | ALCDRUG HALFWAY HOUSE 62 | ALCDRGH62 | 57690 | not used |
| ECS | ADHH | HA063 | ALCDRUG HALFWAY HOUSE 63 | ALCDRGH63 | 57691 | not used |

July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|------------|--------------|-------------|--------------------------|----------------------|-------|----------|
| ECS | ADHH | HA064 | ALCDRUG HALFWAY HOUSE 64 | ALCDRGH64 | 57692 | not used |
| ECS | ADHH | HA065 | ALCDRUG HALFWAY HOUSE 65 | ALCDRGH65 | 57693 | not used |
| ECS | ADHH | HA066 | ALCDRUG HALFWAY HOUSE 66 | ALCDRGH66 | 57694 | not used |
| ECS | ADHH | HA067 | ALCDRUG HALFWAY HOUSE 67 | ALCDRGH67 | 57695 | not used |
| ECS | ADHH | HA068 | ALCDRUG HALFWAY HOUSE 68 | ALCDRGH68 | 57696 | not used |
| ECS | ADHH | HA069 | ALCDRUG HALFWAY HOUSE 69 | ALCDRGH69 | 57697 | not used |
| ECS | ADHH | HA070 | ALCDRUG HALFWAY HOUSE 70 | ALCDRGH70 | 57698 | not used |
| ECS | ADHH | HA071 | ALCDRUG HALFWAY HOUSE 71 | ALCDRGH71 | 57699 | not used |
| ECS | ADHH | HA072 | ALCDRUG HALFWAY HOUSE 72 | ALCDRGH72 | 57700 | not used |
| ECS | ADHH | HA073 | ALCDRUG HALFWAY HOUSE 73 | ALCDRGH73 | 57701 | not used |
| ECS | ADHH | HA074 | ALCDRUG HALFWAY HOUSE 74 | ALCDRGH74 | 57702 | not used |
| ECS | ADHH | HA075 | ALCDRUG HALFWAY HOUSE 75 | ALCDRGH75 | 57703 | not used |
| ECS | ADHH | HA076 | ALCDRUG HALFWAY HOUSE 76 | ALCDRGH76 | 57704 | not used |
| ECS | ADHH | HA077 | ALCDRUG HALFWAY HOUSE 77 | ALCDRGH77 | 57705 | not used |
| ECS | ADHH | HA078 | ALCDRUG HALFWAY HOUSE 78 | ALCDRGH78 | 57706 | not used |
| ECS | ADHH | HA079 | ALCDRUG HALFWAY HOUSE 79 | ALCDRGH79 | 57707 | not used |
| ECS | ADHH | HA080 | ALCDRUG HALFWAY HOUSE 80 | ALCDRGH80 | 57708 | not used |
| ECS | ADHH | HA081 | ALCDRUG HALFWAY HOUSE 81 | ALCDRGH81 | 57709 | not used |
| ECS | ADHH | HA082 | ALCDRUG HALFWAY HOUSE 82 | ALCDRGH82 | 57710 | not used |
| ECS | ADHH | HA083 | ALCDRUG HALFWAY HOUSE 83 | ALCDRGH83 | 57711 | not used |
| ECS | ADHH | HA084 | ALCDRUG HALFWAY HOUSE 84 | ALCDRGH84 | 57712 | not used |
| ECS | ADHH | HA085 | ALCDRUG HALFWAY HOUSE 85 | ALCDRGH85 | 57713 | not used |
| ECS | ADHH | HA086 | ALCDRUG HALFWAY HOUSE 86 | ALCDRGH86 | 57714 | not used |
| ECS | ADHH | HA087 | ALCDRUG HALFWAY HOUSE 87 | ALCDRGH87 | 57715 | not used |
| ECS | ADHH | HA088 | ALCDRUG HALFWAY HOUSE 88 | ALCDRGH88 | 57716 | not used |
| ECS | ADHH | HA089 | ALCDRUG HALFWAY HOUSE 89 | ALCDRGH89 | 57717 | not used |
| ECS | ADHH | HA090 | ALCDRUG HALFWAY HOUSE 90 | ALCDRGH90 | 57718 | not used |
| ECS | ADHH | HA091 | ALCDRUG HALFWAY HOUSE 91 | ALCDRGH91 | 57719 | not used |
| ECS | ADHH | HA092 | ALCDRUG HALFWAY HOUSE 92 | ALCDRGH92 | 57720 | not used |
| ECS | ADHH | HA093 | ALCDRUG HALFWAY HOUSE 93 | ALCDRGH93 | 57721 | not used |
| ECS | ADHH | HA094 | ALCDRUG HALFWAY HOUSE 94 | ALCDRGH94 | 57722 | not used |
| ECS | ADHH | HA095 | ALCDRUG HALFWAY HOUSE 95 | ALCDRGH95 | 57723 | not used |
| ECS | ADHH | HA096 | ALCDRUG HALFWAY HOUSE 96 | ALCDRGH96 | 57724 | not used |
| ECS | ADHH | HA097 | ALCDRUG HALFWAY HOUSE 97 | ALCDRGH97 | 57725 | not used |
| ECS | ADHH | HA098 | ALCDRUG HALFWAY HOUSE 98 | ALCDRGH98 | 57726 | not used |
| ECS | ADHH | HA099 | ALCDRUG HALFWAY HOUSE 99 | ALCDRGH99 | 57727 | not used |
| ECS | ADHH | HA100 | ALCDRUG HALFWAY HOUS 100 | ALCDRGH100 | 57728 | not used |

VHA DIRECTIVE 2002-041**July 5, 2002****TABLE 4F. HOMELESS CMI CARE AND HEALTH CARE FOR HOMELESS VETS (HCHV)****FDR System = ECS****Stop Code = 654**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|---------------------|----------------------------|--------------------------|-------------|--------------|
| ECS | HCM | HM001 | CHRONIC HOMELESS 1 | CRNHMLS1 | 57523 | not used |
| ECS | HCM | HM002 | CHRONIC HOMELESS 2 | CRNHMLS2 | 57524 | not used |
| ECS | HCM | HM003 | CHRONIC HOMELESS 3 | CRNHMLS3 | 57525 | not used |
| ECS | HCM | HM004 | CHRONIC HOMELESS 4 | CRNHMLS4 | 57526 | not used |
| ECS | HCM | HM005 | CHRONIC HOMELESS 5 | CRNHMLS5 | 57527 | not used |
| ECS | HCM | HM006 | CHRONIC HOMELESS 6 | CRNHMLS6 | 57528 | not used |
| ECS | HCM | HM007 | CHRONIC HOMELESS 7 | CRNHMLS7 | 57529 | not used |
| ECS | HCM | HM008 | CHRONIC HOMELESS 8 | CRNHMLS8 | 57530 | not used |
| ECS | HCM | HM009 | CHRONIC HOMELESS 9 | CRNHMLS9 | 57531 | not used |
| ECS | HCM | HM010 | CHRONIC HOMELESS 10 | CRNHMLS10 | 57532 | not used |
| ECS | HCM | HM011 | CHRONIC HOMELESS 11 | CRNHMLS11 | 57533 | not used |
| ECS | HCM | HM012 | CHRONIC HOMELESS 12 | CRNHMLS12 | 57537 | not used |
| ECS | HCM | HM013 | CHRONIC HOMELESS 13 | CRNHMLS13 | 57538 | not used |
| ECS | HCM | HM014 | CHRONIC HOMELESS 14 | CRNHMLS14 | 57539 | not used |
| ECS | HCM | HM015 | CHRONIC HOMELESS 15 | CRNHMLS15 | 57540 | not used |
| ECS | HCM | HM016 | CHRONIC HOMELESS 16 | CRNHMLS16 | 57541 | not used |
| ECS | HCM | HM017 | CHRONIC HOMELESS 17 | CRNHMLS17 | 57542 | not used |
| ECS | HCM | HM018 | CHRONIC HOMELESS 18 | CRNHMLS18 | 57543 | not used |
| ECS | HCM | HM019 | CHRONIC HOMELESS 19 | CRNHMLS19 | 57544 | not used |
| ECS | HCM | HM020 | CHRONIC HOMELESS 20 | CRNHMLS20 | 57545 | not used |
| ECS | HCM | HM021 | CHRONIC HOMELESS 21 | CRNHMLS21 | 57546 | not used |
| ECS | HCM | HM022 | CHRONIC HOMELESS 22 | CRNHMLS22 | 57547 | not used |
| ECS | HCM | HM023 | CHRONIC HOMELESS 23 | CRNHMLS23 | 57548 | not used |
| ECS | HCM | HM024 | CHRONIC HOMELESS 24 | CRNHMLS24 | 57549 | not used |
| ECS | HCM | HM025 | CHRONIC HOMELESS 25 | CRNHMLS25 | 57550 | not used |
| ECS | HCM | HM026 | CHRONIC HOMELESS 26 | CRNHMLS26 | 57551 | not used |
| ECS | HCM | HM027 | CHRONIC HOMELESS 27 | CRNHMLS27 | 57552 | not used |
| ECS | HCM | HM028 | CHRONIC HOMELESS 28 | CRNHMLS28 | 57553 | not used |
| ECS | HCM | HM029 | CHRONIC HOMELESS 29 | CRNHMLS29 | 57554 | not used |
| ECS | HCM | HM030 | CHRONIC HOMELESS 30 | CRNHMLS30 | 57555 | not used |
| ECS | HCM | HM031 | CHRONIC HOMELESS 31 | CRNHMLS31 | 57556 | not used |
| ECS | HCM | HM032 | CHRONIC HOMELESS 32 | CRNHMLS32 | 57557 | not used |
| ECS | HCM | HM033 | CHRONIC HOMELESS 33 | CRNHMLS33 | 57558 | not used |
| ECS | HCM | HM034 | CHRONIC HOMELESS 34 | CRNHMLS34 | 57559 | not used |
| ECS | HCM | HM035 | CHRONIC HOMELESS 35 | CRNHMLS35 | 57560 | not used |
| ECS | HCM | HM036 | CHRONIC HOMELESS 36 | CRNHMLS36 | 57561 | not used |
| ECS | HCM | HM037 | CHRONIC HOMELESS 37 | CRNHMLS37 | 57562 | not used |
| ECS | HCM | HM038 | CHRONIC HOMELESS 38 | CRNHMLS38 | 57563 | not used |

VHA DIRECTIVE 2002-041

July 5, 2002

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|------------|--------------|-------------|---------------------|-------------------|-------|----------|
| ECS | HCM | HM039 | CHRONIC HOMELESS 39 | CRNHMLS39 | 57564 | not used |
| ECS | HCM | HM040 | CHRONIC HOMELESS 40 | CRNHMLS40 | 57565 | not used |
| ECS | HCM | HM041 | CHRONIC HOMELESS 41 | CRNHMLS41 | 57566 | not used |
| ECS | HCM | HM042 | CHRONIC HOMELESS 42 | CRNHMLS42 | 57567 | not used |
| ECS | HCM | HM043 | CHRONIC HOMELESS 43 | CRNHMLS43 | 57568 | not used |
| ECS | HCM | HM044 | CHRONIC HOMELESS 44 | CRNHMLS44 | 57569 | not used |
| ECS | HCM | HM045 | CHRONIC HOMELESS 45 | CRNHMLS45 | 57570 | not used |
| ECS | HCM | HM046 | CHRONIC HOMELESS 46 | CRNHMLS46 | 57571 | not used |
| ECS | HCM | HM047 | CHRONIC HOMELESS 47 | CRNHMLS47 | 57572 | not used |
| ECS | HCM | HM048 | CHRONIC HOMELESS 48 | CRNHMLS48 | 57573 | not used |
| ECS | HCM | HM049 | CHRONIC HOMELESS 49 | CRNHMLS49 | 57574 | not used |
| ECS | HCM | HM050 | CHRONIC HOMELESS 50 | CRNHMLS50 | 57575 | not used |
| ECS | HCM | HM051 | CHRONIC HOMELESS 51 | CRNHMLS51 | 57576 | not used |
| ECS | HCM | HM052 | CHRONIC HOMELESS 52 | CRNHMLS52 | 57577 | not used |
| ECS | HCM | HM053 | CHRONIC HOMELESS 53 | CRNHMLS53 | 57578 | not used |
| ECS | HCM | HM054 | CHRONIC HOMELESS 54 | CRNHMLS54 | 57579 | not used |
| ECS | HCM | HM055 | CHRONIC HOMELESS 55 | CRNHMLS55 | 57580 | not used |
| ECS | HCM | HM056 | CHRONIC HOMELESS 56 | CRNHMLS56 | 57581 | not used |
| ECS | HCM | HM057 | CHRONIC HOMELESS 57 | CRNHMLS57 | 57582 | not used |
| ECS | HCM | HM058 | CHRONIC HOMELESS 58 | CRNHMLS58 | 57583 | not used |
| ECS | HCM | HM059 | CHRONIC HOMELESS 59 | CRNHMLS59 | 57584 | not used |
| ECS | HCM | HM060 | CHRONIC HOMELESS 60 | CRNHMLS60 | 57591 | not used |
| ECS | HCM | HM061 | CHRONIC HOMELESS 61 | CRNHMLS61 | 57592 | not used |
| ECS | HCM | HM062 | CHRONIC HOMELESS 62 | CRNHMLS62 | 57593 | not used |
| ECS | HCM | HM063 | CHRONIC HOMELESS 63 | CRNHMLS63 | 57594 | not used |
| ECS | HCM | HM064 | CHRONIC HOMELESS 64 | CRNHMLS64 | 57595 | not used |
| ECS | HCM | HM065 | CHRONIC HOMELESS 65 | CRNHMLS65 | 57596 | not used |
| ECS | HCM | HM066 | CHRONIC HOMELESS 66 | CRNHMLS66 | 57597 | not used |
| ECS | HCM | HM067 | CHRONIC HOMELESS 67 | CRNHMLS67 | 57598 | not used |
| ECS | HCM | HM068 | CHRONIC HOMELESS 68 | CRNHMLS68 | 57599 | not used |
| ECS | HCM | HM069 | CHRONIC HOMELESS 69 | CRNHMLS69 | 57600 | not used |
| ECS | HCM | HM070 | CHRONIC HOMELESS 70 | CRNHMLS70 | 57601 | not used |
| ECS | HCM | HM071 | CHRONIC HOMELESS 71 | CRNHMLS71 | 57602 | not used |
| ECS | HCM | HM072 | CHRONIC HOMELESS 72 | CRNHMLS72 | 57603 | not used |
| ECS | HCM | HM073 | CHRONIC HOMELESS 73 | CRNHMLS73 | 57604 | not used |
| ECS | HCM | HM074 | CHRONIC HOMELESS 74 | CRNHMLS74 | 57605 | not used |
| ECS | HCM | HM075 | CHRONIC HOMELESS 75 | CRNHMLS75 | 57606 | not used |
| ECS | HCM | HM076 | CHRONIC HOMELESS 76 | CRNHMLS76 | 57607 | not used |
| ECS | HCM | HM077 | CHRONIC HOMELESS 77 | CRNHMLS77 | 57608 | not used |
| ECS | HCM | HM078 | CHRONIC HOMELESS 78 | CRNHMLS78 | 57609 | not used |
| ECS | HCM | HM079 | CHRONIC HOMELESS 79 | CRNHMLS79 | 57610 | not used |
| ECS | HCM | HM080 | CHRONIC HOMELESS 80 | CRNHMLS80 | 57611 | not used |

VHA DIRECTIVE 2002-041**July 5, 2002**

| FDR SYS | TEMP DEPT | ECS Code | Product Description | Short Description | IP # | CPT # |
|--------------------|----------------------|-----------------|----------------------------|--------------------------|-------------|--------------|
| ECS | HCMI | HM081 | CHRONIC HOMELESS 81 | CRNHMLS81 | 57612 | not used |
| ECS | HCMI | HM082 | CHRONIC HOMELESS 82 | CRNHMLS82 | 57613 | not used |
| ECS | HCMI | HM083 | CHRONIC HOMELESS 83 | CRNHMLS83 | 57614 | not used |
| ECS | HCMI | HM084 | CHRONIC HOMELESS 84 | CRNHMLS84 | 57615 | not used |
| ECS | HCMI | HM085 | CHRONIC HOMELESS 85 | CRNHMLS85 | 57616 | not used |
| ECS | HCMI | HM086 | CHRONIC HOMELESS 86 | CRNHMLS86 | 57617 | not used |
| ECS | HCMI | HM087 | CHRONIC HOMELESS 87 | CRNHMLS87 | 57618 | not used |
| ECS | HCMI | HM088 | CHRONIC HOMELESS 88 | CRNHMLS88 | 57619 | not used |
| ECS | HCMI | HM089 | CHRONIC HOMELESS 89 | CRNHMLS89 | 57620 | not used |
| ECS | HCMI | HM090 | CHRONIC HOMELESS 90 | CRNHMLS90 | 57621 | not used |
| ECS | HCMI | HM091 | CHRONIC HOMELESS 91 | CRNHMLS91 | 57622 | not used |
| ECS | HCMI | HM092 | CHRONIC HOMELESS 92 | CRNHMLS92 | 57623 | not used |
| ECS | HCMI | HM093 | CHRONIC HOMELESS 93 | CRNHMLS93 | 57624 | not used |
| ECS | HCMI | HM094 | CHRONIC HOMELESS 94 | CRNHMLS94 | 57625 | not used |
| ECS | HCMI | HM095 | CHRONIC HOMELESS 95 | CRNHMLS95 | 57585 | not used |
| ECS | HCMI | HM096 | CHRONIC HOMELESS 96 | CRNHMLS96 | 57586 | not used |
| ECS | HCMI | HM097 | CHRONIC HOMELESS 97 | CRNHMLS97 | 57587 | not used |
| ECS | HCMI | HM098 | CHRONIC HOMELESS 98 | CRNHMLS98 | 57588 | not used |
| ECS | HCMI | HM099 | CHRONIC HOMELESS 99 | CRNHMLS99 | 57589 | not used |
| ECS | HCMI | HM100 | CHRONIC HOMELESS 100 | CRNHMLS100 | 57590 | not used |

c. Reporting of National VHA Contracted HCHC Care

(1) This timely workload and cost capture of a major increasing segment of non-VA care, HCHC, provides low cost capture in routine business process of the authorizing clinician.

(2) The reports by VA medical center provider, by contractor and type of contractor care, by patient Social Security Number (SSN), by month for all HCHC non-VA care, etc., are available at the VA medical center from ECS, as soon as data is entered and are usually run monthly or more often. This report feature of ECS is key for VA medical center authorizers for clinical following and cost management.

NOTE: The cost-workload-integrated National DSS database information which derives from monthly ECS transmission to the Austin Automation Center (AAC)-based DSS are available for National Millennium Bill reporting as well as for GECSHG analysis, and analyses by VISN Chief Medical Officer (CMO)/Quality Officer (QO)/LTC groups and other National data users.

(3) DSS National Reports

(a) DSS National Reports of the Costs and Workload of HCHC in VHA are available on the Assistant Deputy Under Secretary for Health VSSC/KLF website, "DSS Reports" section, Outpatient Reports. Using the three stop codes 680, 681, and 682, the workload with costs can be identified per VA medical center, VISN and Nationally for stops 680 and 681. Since 682 is

July 5, 2002

referral only (without costs to VA), a new report designed to pull out only Millennium Bill Measures will also report these data by referral product type for all levels of VHA.

(b) When unique SSNs are needed, the AAC can provide authorization access levels to the VHA Central Office, VISN staff needing the data.

3. GECSHG's AND NATIONAL VHA SOCIAL WORK'S FY 2000 TIMELY CAPTURE OF NON-VA RESIDENTIAL CARE BY ECS

a. Overall Approach

(1) The DSS Fiscal team on the DSS non-VA CNH Workload Task Force reported that over \$333 million was spent on non-VA Residential Care per year, and in FY 1998 and FY 1999, no timely reporting of this care in the month it was incurred by the patient was available. Working with GECSHG, the National VHA Social Work Service, and the National VHA Social Work Informatics Group, the DSS Program Office, at the request of the DSS Fiscal Team on the non-VA CNH Workload Task Force, developed a low-cost, user-friendly method to capture CNH, SNH, SDH, SHC care, and non-VA residential care, in the month it was incurred by the patient and costed on VHA's cost system, FMS. This was designed to be in synchrony with the authorizing clinician's (Social Worker's) Business Process.

(2) Each authorizing clinician maintains a spreadsheet of patient's names, entry dates and changes to specific contracted or state care facilities, and updates it whenever a contractor reports a change (death, transfer, or level of care and cost rate). This spreadsheet is used to track care, assist in clinical follow-up, and budget limited dollars in a timely way.

(3) Additionally, at month's end, the authorizing clinician notifies Fiscal Service of the most updated 1358 cost estimate for that month for each of the types of non-VA residential care. Additionally, the information is provided to a program support person either in the Social Work, Fiscal or the VISN Business Office who enters the required data into the Fee package, the bill paying package, for CNH care.

(4) At the month's end the authorizing clinician uploads the spreadsheet automatically to the ECS Vista Class I package, or enters the monthly total (BDOC) by SSN, at the close of the month, if the list of clients is short (about 30 minute entries per month) into ECS. ECS is used:

(a) Locally for reporting purposes for clinical care quality and budgeting, and

(b) Nationally to get the workload in the month the work is done for the patient and the costs are entered into FMS.

(5) The ECS provides a range of user-friendly reports immediately available at the VA medical center as soon as the data is entered: monthly workload by Provider, by DSS Department (CNH, SNH, SDH, SHC, etc.), by SSN, by Contractor and/or Product (residential rate BDOC).

VHA DIRECTIVE 2002-041**July 5, 2002****b. Method**

(1) **VACCs for non-VA Residential Care.** Table 5 provides the list and definitions of non-VA residential care which is paid for by the VHA. BDOC workload for all of these types of non-VA residential care is collected on ECS and sent automatically to the VHA National Workload Cost Integrated Database, DSS.

TABLE 5. VACC for VA-PAID AND/OR NON-VA RESIDENTIAL CARE (CNH, SNH, CMI, etc.)

| <i>Cost Center (Program Symbol)</i> | <i>Description</i> |
|---|--|
| 8331 | Domiciliary Care – State Homes: Limited to budget object code 4110. |
| 8341 | Nursing Home Care – State Homes: Limited to budget object code 4110. |
| 8342 | Nursing Home Care – Community Homes |
| 8344 | Homeless Veterans Comprehensive Service Program Act 1992 (Limited to BOC 4110 and 4120). |
| 8348 | Contract Home Mental Health Care: Cost of purchase or contract for MH care by MH— specialists (such as a Nurse Practitioner in MH), a MH Social Worker, or other MH-trained health professional provided at patient's home by a contractor, specializing in Home MH care. |
| 8361 | Alcohol and Drug Treatment and Rehabilitation: Includes cost for contracts for care and treatment and rehabilitation services in halfway houses, therapeutic communities, psychiatric residential treatment centers, and other community-based treatment facilities for veterans with alcohol or drug dependence or abuse disabilities. |
| 8362 | Contract Homeless, CMI, Abused Patients: Do not record salaries or personal services of employees that can be charged to other cost centers. |

(2) DSS Identifiers (also known as Stopcodes) Used to collect non-VA residential care VA staff work (use with patient care roster)

(a) VA Staff Work Coordinating Non-VA Residential Care. For VHA staff work related to review or evaluation of CNH, and other non-residential care facilities, the relevant stop codes are 119, 121 and 503.

July 5, 2002

(b) Non-VA Contracted Veteran Residential Care (use only on ECS and/or DSS). In FY 2000, four new stop codes (or DSS identifiers) to reflect the specific Outpatient Production Departments on ECS and DSS, to which the different types of non-VA residential care are assigned, were developed.

(c) A fifth new stop code was added in FY 2001 for three new contract programs where workload was being collected on ECS (from VACC 8344, 8361 and 8362).

(d) Table 6 summarizes the VHA National stop code used for non-VA residential care.

TABLE 6. RELEVANT VHA STOP CODES (DSS IDENTIFIERS)

| Name and/or Description | Stopcode | CDR Account | In-activation Date | Effective Date | Definition |
|------------------------------------|------------|-------------|--------------------|----------------|---|
| CONTRACT NURSING HOME DAYS | 650 | N/A | | 10/1/99 | Records number of CNH days which the patient had in VA-paid, Vendor-provided CNH for that month. <i>Not for use on PCE. Only for use on ECS.</i> |
| STATE NURSING HOME DAYS | 651 | N/A | | 10/1/99 | Records number of SNH days which the patient had in a VA-paid, state provided SNH for that month. <i>Not for use on PCE. Only for use on ECS.</i> |
| STATE DOMICILIARY HOME DAYS | 652 | N/A | | 10/1/99 | Records number of State Domiciliary home days which the veteran had in VA-paid, State home for that month. <i>Not for use on PCE. Only for use on ECS.</i> |
| STATE HOSPITAL CARE | 653 | N/A | | 10/1/99 | Records information about State Hospital days and other information which a veteran had in a VA-paid State Hospital. <i>Not for use on PCE. Only for use on ECS.</i> |

VHA DIRECTIVE 2002-041

July 5, 2002

| Name and/or Description | Stopcode | CDR Account | In-activation Date | Effective Date | Definition |
|-------------------------------------|-----------------|--------------------|---------------------------|-----------------------|---|
| NON-VA RESIDENTIAL CARE DAYS | 654 | N/A | | 10/01/00 | Records number of non-VA residential home days which the patient had in a VA-Paid non-VA Special Residential Care (e.g., Psychiatric or Alcohol Rehabilitation programs) for that month. <i>Not for use on PCE. Only for use on ECS.</i> |

(3) Non-VA Residential Care Production Units and/or Departments

(a) Seven DSS departments were developed to apply costs from the seven VACCs and products to, so that the DSS can apply its activity-based costing functionality to develop workload-cost integrated information, and specifically costs per product per SSN which reconcile to the current month's FMS (830) cost report.

(b) Table 7 describes the seven DSS departments and the information sets required to set up these departments on the ECS. The individual DSS departments each have separate costs coming from the relevant VACC.

TABLE 7. NON-VA RESIDENTIAL CARE ECS AND/OR DSS DEPARTMENTS

| ECS FIELD | AUA1 | AUB1 | AUC1 | AUD1 | AU41 | AU51 | AU61 |
|-------------------------------|-------------------------------------|---------------------------------|-------------------------------------|----------------------------------|---|------------------------------|--|
| DSS Unit | Community Nursing Home (CNH) | State Nursing Home (SNH) | State Domiciliary Home (SDH) | State Hospital Care (SHC) | Alcohol and/or Drug Rehabilitation Centers | CMI Homeless Day Care | Healthcare for Homeless Veterans (HCHV) |
| <i>Service</i> | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care | Ambulatory Care |
| Cost Center | 834200 | 834100 | 833100 | 834800 | 836100 | 836200 | 834400 |
| Med Specialty | Geriatrics | Geriatrics | Geriatrics | Geriatrics | Geriatrics | Geriatrics | Geriatrics |
| DSS Unit Number | AUA1 | AUB1 | AUC1 | AUD1 | | | |
| Date Entry and/or Date | Now | Now | Now | Now | Now | Now | Now |
| Send to PCE | N | N | N | N | N | N | N |
| <i>Associated Stopcode</i> | 650 | 651 | 652 | 653 | 654 | 654 | 654 |

July 5, 2002

| ECS FIELD | AUA1 | AUB1 | AUC1 | AUD1 | AU41 | AU51 | AU61 |
|--|-------------------------------------|---------------------------------|-------------------------------------|----------------------------------|---|------------------------------|--|
| DSS Unit | Community Nursing Home (CNH) | State Nursing Home (SNH) | State Domiciliary Home (SDH) | State Hospital Care (SHC) | Alcohol and/or Drug Rehabilitation Centers | CMI Homeless Day Care | Healthcare for Homeless Veterans (HCHV) |
| <i>Select your VA medical center's products from these lists</i> | CNH List A | SNH List B | SDH LIST C | SHC List D | ADRC List E | CMIH List F | Use CMIH List F |

(4) **National VHA Products.** To standardize product capture across the entire VHA, working with GECSHG and the National Authorizing Clinicians (Social Worker) Informatics Groups and their entire field groups, products were made which allow local contractors to be represented at up to 13 rate per bed day levels per contractor. Most VA medical centers will generically maintain around 13 levels of different cost and/or BDOC ranges per contractor as needed.

NOTE: Table 4 provides the lists of products of the seven types of non-VA residential care currently captured on the ECS system. This is seen in the following six sub-tables:

| | |
|---|----------|
| Table 4A – CNH products | (list A) |
| Table 4B – SNH | (list B) |
| Table 4C – SDH | (list C) |
| Table 4D – SHC | (list D) |
| Table 4E – Alcohol and/or Drug Rehabilitation | (list E) |
| Table 4F – HCMI and HCHV care | (list F) |

c. Reporting of National VHA-Contracted Residential Care

(1) National Costs and/or Use by Patients DSS Reports

(a) The timely workload-cost-integrated National reporting of non-VA residential care is done via the VHA DSS National database. Like contracted home and community care, this non-VA residential care (per SSN) is represented in DSS with specific stop codes which are not available on any other National VHA database (not on CDR or the National Patient Care Database (NPCD)).

(b) The National DSS Outpatient Extract, and its web-enabled reporting on the CNO VSSC/KLF website permits any authorized VHA Central Office, VISN or VA medical center user to track the costs and volume of care for each of these non-VA residential care stop codes from the KLF website. Counts of unique SSNs could be done directly to scrambled SSNs.

VHA DIRECTIVE 2002-041

July 5, 2002

(c) Additionally those persons further authorized to have AAC clearances to view the actual (unscrambled) SSNs can also look up specific individual's care or count uniques via this latter approach.

(d) Large data customers, like AAC, Policy and Planning, Office of Performance and Quality (OP&Q), Patient care Services (PCS), etc., can pull data directly from the National DSS Statistical Analysis System (SAS) files in AAC.

(2) **National Costs – only DSS Reports at the Production Unit Level.** National DSS reports which provide the direct-only costs per non-VA residential care DSS department, the BOCs used, and other attributes, such as relevant VISN Product Line, can also be obtained after February 2001 on the CNO/VSSC/KLF website. **NOTE:** For CHN etc. and non-VA Home Health Care ECS Products, contact DSS Technical Office: 781-275-9175 x107.

4. RELEVANT STOPCODES (FOR NON-VA LTC)

a. Residential Care

| | | |
|-----|---|-----|
| 650 | - | CNH |
| 651 | - | SNH |
| 652 | - | SDH |
| 652 | - | SHC |

b. Home-Community Health Care

682 - Referral Statistics

681 - All non-VA Home Community Healthcare (Includes non-VA ADHC, HHA, skilled care, MH, Infusion, Hospic, and Respiratory)

680 - This is always entered into PCE. It represents patient-encounters with HCHC patients by VA-paid CHN staff.